

Letter of Transmittal

Submitted to:

Tim Zeichert

WI Dept. of Natural Resources

101 S. Webster St.

Madison WI 53707 7921

PO BOX 7921

Date:

6/24/2020

Attached

Job:

Ellis Hand Car Wash

Under Separate Cover

Contents:

Well Abandonment Forms for the Ellis Hand Car Wash site located at 2335 W. Atkinson Avenue in Milwaukee, WI.
BRRTS #: 03-41-402801

Remarks:

Attached are the well abandonment forms for the above site as requested on 6/9/20. The wells have been properly abandoned and no investigative waste remains on-site. Attached are well abandonment forms documenting that the work was completed. Following your review of this information please forward the "Final Closure" letter to our client and copy METCO.

If you have any questions please call or email.

Signed: Jason Powell

cc: Donald Miller - New Hope
Missionary Baptist Church

METCO
709 Gillette St., Ste 3
La Crosse, WI 54603-2382
(608)781-8879 fax (608)781-8893

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.

Verification Only of Fill and Seal

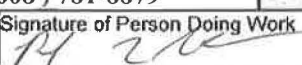
Route to:
 Drinking Water Watershed/Wastewater Remediation/Redevelopment
 Waste Management Other: _____

1. Well Location Information				2. Facility / Owner Information			
County MILWAUKEE		WI Unique Well # of Removed Well WB733		Facility Name Ellis Hand Car Wash		Facility ID (FID or PWS) 341070620	
Latitude / Longitude (Degrees and Minutes) 43 ° 5.6 ' N		Method Code (see instructions) 87 ° 56.48 ' W		License/Permit/Monitoring #		Original Well Owner NewHope Missionary Baptist Church	
1/4 SW or Gov't Lot #		Section 6	Township 7 N	Range 22	<input checked="" type="checkbox"/> E <input type="checkbox"/> W		Present Well Owner NewHope Missionary Baptist Church
Well Street Address 2335 W. Atkinson Avenue				Mailing Address of Present Owner 2433 W. Roosevelt Drive			
Well City, Village or Town Milwaukee				Well ZIP Code 53209-		City of Present Owner Milwaukee	
Subdivision Name				Lot #		State WI	
Reason For Removal From Service Sampling Complete				WI Unique Well # of Replacement Well			

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 (mm/dd/yyyy) 8/13/2019		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): _____		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	
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		Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Total Well Depth From Ground Surface (ft.) 13		Casing Diameter (in.) 2		Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Lower Drillhole Diameter (in.) 8		Casing Depth (ft.) 3		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		Depth to Water (feet) 3.71		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)?		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): <u>Gravity</u>		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	

5. Material Used To Fill Well / Drillhole	From (ft.)	To (ft.)	lbs
3/8" Medium Chip Bentonite	Surface	13	20

6. Comments
Monitoring Well MW-1R

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Rob Wilmoth/METCO		License #	Date of Filling & Sealing (mm/dd/yyyy) 6/22/2020	Date Received	Noted By
Street or Route 709 Gillette St., Ste #3		Telephone Number (608) 781-8879		Comments	
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work 	Date Signed 6/24/2020	

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Verification Only of Fill and Seal

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

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

County MILWAUKEE	WI Unique Well # of Removed Well WB734	Hicap #	Facility Name Ellis Hand Car Wash
Latitude / Longitude (Degrees and Minutes) 43 ° 5.6 ' N 87 ° 56.48 ' W			Facility ID (FID or PWS) 341070620
Method Code (see instructions)			License/Permit/Monitoring #
1/4 SW or Gov't Lot #	1/4 SW	Section 6	Township 7 N
		Range 22	Direction <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well Street Address 2335 W. Atkinson Avenue			Original Well Owner NewHope Missionary Baptist Church
Well City, Village or Town Milwaukee			Present Well Owner NewHope Missionary Baptist Church
Subdivision Name			Mailing Address of Present Owner 2433 W. Roosevelt Drive
Well ZIP Code 53209-			City of Present Owner Milwaukee
Lot #			State WI
			ZIP Code 53209-

Reason For Removal From Service: **Sampling Complete**

WI Unique Well # of Replacement Well: _____

3. Well / Drillhole / Borehole Information

Monitoring Well Original Construction Date (mm/dd/yyyy)
8/13/2019

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

Borehole / Drillhole

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

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

Pump and piping removed? Yes No N/A

Liner(s) removed? 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

Formation Type:
 Unconsolidated Formation Bedrock

Total Well Depth From Ground Surface (ft.) 13	Casing Diameter (in.) 2	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): <u>Gravity</u>
Lower Drillhole Diameter (in.) 8	Casing Depth (ft.) 3	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 type="checkbox"/> Bentonite Chips
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet) 3.63	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.)	lbs
3/8" Medium Chip Bentonite	Surface	13	20

6. Comments
Monitoring Well MW-2R

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Rob Wilmoth/METCO	License #	Date of Filling & Sealing (mm/dd/yyyy) 6/22/2020	Date Received	Noted By
Street or Route 709 Gillette St., Ste #3	Telephone Number (608) 781-8879	Comments		
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work <i>Rob Wilmoth</i>	Date Signed 6/24/2020

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Verification Only of Fill and Seal

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

1. Well Location Information				2. Facility / Owner Information			
County MILWAUKEE		WI Unique Well # of Removed Well WA126		Hicap #		Facility Name Ellis Hand Car Wash	
Latitude / Longitude (Degrees and Minutes) 43 ° 5.6 ' N		Method Code (see instructions)		Facility ID (FID or PWS) 341070620		License/Permit/Monitoring #	
87 ° 56.48 ' W				Original Well Owner NewHope Missionary Baptist Church		Present Well Owner NewHope Missionary Baptist Church	
Well Street Address 2335 W. Atkinson Avenue		Mailing Address of Present Owner 2433 W. Roosevelt Drive		City of Present Owner Milwaukee		State ZIP Code WI 53209-	
Well City, Village or Town Milwaukee		Well ZIP Code 53209-		City of Present Owner Milwaukee		State ZIP Code WI 53209-	
Subdivision Name		Lot #					

Reason For Removal From Service Sampling Complete		WI Unique Well # of Replacement Well	
3. 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) 3/15/2018	
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.	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		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): <u>Gravity</u>	
Total Well Depth From Ground Surface (ft.) 14		Casing Diameter (in.) 2	
Lower Drillhole Diameter (in.) 8		Casing Depth (ft.) 4	
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown		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 type="checkbox"/> Bentonite Chips	
If yes, to what depth (feet)?		Depth to Water (feet) 3.94	
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.)	lbs	
Surface	14	22	3/8" Medium Chip Bentonite

6. Comments
Monitoring Well MW-3

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Rob Wilmoth/METCO		License #	Date of Filling & Sealing (mm/dd/yyyy) 6/22/2020	Date Received	Noted By
Street or Route 709 Gillette St., Ste #3		Telephone Number (608) 781-8879		Comments	
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work <i>Rob Wilmoth</i>	Date Signed 6/24/2020	

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Verification Only of Fill and Seal

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

1. Well Location Information				2. Facility / Owner Information			
County MILWAUKEE		WI Unique Well # of Removed Well WA127		Hicap #		Facility Name Ellis Hand Car Wash	
Latitude / Longitude (Degrees and Minutes) 43 ° 5.6 ' N 87 ° 56.48 ' W				Method Code (see instructions)		Facility ID (FID or PWS) 341070620	
1/4 SW or Gov't Lot #		1/4 SW	Section 6	Township 7 N	Range 22	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	License/Permit/Monitoring #
Well Street Address 2335 W. Atkinson Avenue				Original Well Owner NewHope Missionary Baptist Church			
Well City, Village or Town Milwaukee				Well ZIP Code 53209-			
Subdivision Name				Lot #		Mailing Address of Present Owner 2433 W. Roosevelt Drive	
Reason For Removal From Service Sampling Complete				WI Unique Well # of Replacement Well			
City of Present Owner Milwaukee		State WI		ZIP Code 53209-		Present Well Owner NewHope Missionary Baptist Church	

3. Well / Drillhole / Borehole Information				4. Pump, Liner, Screen, Casing & Sealing Material					
<input checked="" type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy) 3/14/2018		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				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.) 14		Casing Diameter (in.) 2		Did sealing material rise to surface?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Lower Drillhole Diameter (in.) 8		Casing Depth (ft.) 4		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 checked="" type="checkbox"/> No <input type="checkbox"/> Unknown				If yes, was hole retopped?				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, to what depth (feet)?		Depth to Water (feet) 4.83		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"/> 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 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.)	lbs
3/8" Medium Chip Bentonite			Surface	14	22

6. Comments
Monitoring Well MW-4

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Rob Wilmoth/METCO		License #	Date of Filling & Sealing (mm/dd/yyyy) 6/22/2020	Date Received	Noted By
Street or Route 709 Gillette St., Ste #3			Telephone Number (608) 781-8879	Comments	
City La Crosse		State WI	ZIP Code 54603-	Signature of Person Doing Work <i>[Signature]</i>	
				Date Signed 6/24/2020	

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

1. Well Location Information				2. Facility / Owner Information			
County MILWAUKEE		WI Unique Well # of Removed Well WA128		Hicap #		Facility Name Ellis Hand Car Wash	
Latitude / Longitude (Degrees and Minutes) 43 ° 5.6 ' N		Method Code (see instructions)		Facility ID (FID or PWS) 341070620		License/Permit/Monitoring #	
87 ° 56.48 ' W				Original Well Owner NewHope Missionary Baptist Church		Present Well Owner NewHope Missionary Baptist Church	
1/4 SW	1/4 SW	Section 6	Township 7 N	Range 22	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Mailing Address of Present Owner 2433 W. Roosevelt Drive	
Well Street Address 2335 W. Atkinson Avenue				City of Present Owner Milwaukee			
Well City, Village or Town Milwaukee				State WI			
Subdivision Name				ZIP Code 53209-			
Reason For Removal From Service Sampling Complete				Well ZIP Code 53209-			
WI Unique Well # of Replacement Well				Lot #			

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 (mm/dd/yyyy) 3/14/2018			
Construction Type:		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 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 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			
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____		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			
Formation Type:		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 type="checkbox"/> Bentonite Chips			
Total Well Depth From Ground Surface (ft.) 14		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			
Casing Diameter (in.) 2		Total Well Depth From Ground Surface (ft.) 14 Casing Depth (ft.) 4			
Lower Drillhole Diameter (in.) 8		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) 5			

5. Material Used To Fill Well / Drillhole	From (ft.)	To (ft.)	lbs
3/8" Medium Chip Bentonite	Surface	14	22

6. Comments
Monitoring Well MW-5

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Rob Wilmoth/METCO		License #	Date of Filling & Sealing (mm/dd/yyyy) 6/22/2020	Date Received	Noted By
Street or Route 709 Gillette St., Ste #3			Telephone Number (608) 781-8879	Comments	
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work <i>[Signature]</i>	Date Signed 6/24/2020	

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<input type="checkbox"/> Verification Only of Fill and Seal	Route to:		
	<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 MILWAUKEE		WI Unique Well # of Removed Well WA129		Hicap #		Facility Name Ellis Hand Car Wash	
Latitude / Longitude (Degrees and Minutes) 43 ° 5.6 ' N 87 ° 56.48 ' W				Method Code (see instructions)			
Facility ID (FID or PWS) 341070620		License/Permit/Monitoring #		Original Well Owner NewHope Missionary Baptist Church		Present Well Owner NewHope Missionary Baptist Church	
Mailing Address of Present Owner 2433 W. Roosevelt Drive		City of Present Owner Milwaukee		State WI		ZIP Code 53209-	
Well Street Address 2335 W. Atkinson Avenue		Well City, Village or Town Milwaukee		Well ZIP Code 53209-			
Subdivision Name		Lot #					

Reason For Removal From Service Sampling Complete		WI Unique Well # of Replacement Well	
3. Well / Drillhole / Borehole Information			
<input checked="" type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy) 3/14/2018	
<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.) 14		Casing Diameter (in.) 2	
Lower Drillhole Diameter (in.) 8		Casing Depth (ft.) 4	
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) 5.55	
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	
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 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"/> 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 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.)	lbs
3/8" Medium Chip Bentonite			Surface	14	22

6. Comments
Monitoring Well MW-6

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Rob Wilmoth/METCO		License #	Date of Filling & Sealing (mm/dd/yyyy) 6/22/2020	Date Received	Noted By
Street or Route 709 Gillette St., Ste #3			Telephone Number (608) 781-8879	Comments	
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work <i>[Signature]</i>	Date Signed 6/24/2020	

Facility/Project Name Ellis Hand Carwash		Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> E. <input type="checkbox"/> W.		Well Name MW-1R	
Facility License, Permit or Monitoring No.		Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>		Unique Well No. W1B733 DNR Well ID No.	
Facility ID		Lat. " Long. " or		Date Well Installed 08/13/2019	
Type of Well Well Code 11, MW		Section Location of Waste/Source 1/4 of 1/4 of Sec. T. N, R. <input type="checkbox"/> E <input type="checkbox"/> W		Well Installed By: Darrin Prentice	
Distance from Waste/Source ft.		Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known		Gov. Lot Number	
Enf. Stds. Apply <input type="checkbox"/>				Geiss Soil & Samples LLC	

- A. Protective pipe, top elevation ----- ft. MSL
- B. Well casing, top elevation ----- ft. MSL
- C. Land surface elevation ----- ft. MSL
- D. Surface seal, bottom ----- ft. MSL or 0 ft.

12. USCS classification of soil near screen:
 GP GM GC GW SW SP
 SM SC ML MH CL CH
 Bedrock

13. Sieve analysis performed? Yes No

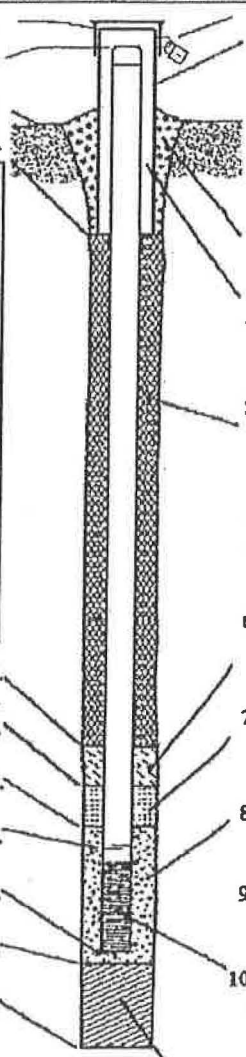
14. Drilling method used: Rotary 50
 Hollow Stem Auger 41
 Other

15. Drilling fluid used: Water 02 Air 01
 Drilling Mud 03 None 99

16. Drilling additives used? Yes No

Describe _____

17. Source of water (attach analysis, if required): _____



- 1. Cap and lock? Yes No
- 2. Protective cover pipe:
 - a. Inside diameter: 8 in.
 - b. Length: 1 ft.
 - c. Material: Steel 04
Other
 - d. Additional protection? Yes No
If yes, describe: _____
- 3. Surface seal:
 - Bentonite 30
 - Concrete 01
 - Other
- 4. Material between well casing and protective pipe:
 - Bentonite 30
 - Other
- 5. Annular space seal:
 - a. Granular/Chipped Bentonite 33
 - b. _____ Lbs/gal mud weight . . . Bentonite-sand slurry 35
 - c. _____ Lbs/gal mud weight Bentonite slurry 31
 - d. _____ % Bentonite Bentonite-cement grout 50
 - e. _____ Ft³ volume added for any of the above
 - f. How installed: Tremie 01
Tremie pumped 02
Gravity 08
- 6. Bentonite seal:
 - a. Bentonite granules 33
 - b. 1/4 in. 3/8 in. 1/2 in. Bentonite chips 32
 - c. _____ Other
- 7. Fine sand material: Manufacturer, product name & mesh size
 - a. #20 Red Flint
 - b. Volume added _____ ft³
- 8. Filter pack material: Manufacturer, product name & mesh size
 - a. #40 Red Flint
 - b. Volume added _____ ft³
- 9. Well casing:
 - Flush threaded PVC schedule 40 23
 - Flush threaded PVC schedule 80 24
 - Other
- 10. Screen material: PVC
 - a. Screen type:
 - Factory cut 11
 - Continuous slot 01
 - Other
 - b. Manufacturer Johnson
 - c. Slot size: 0.010 in.
 - d. Slotted length: 10 ft.
- 11. Backfill material (below filter pack):
 - None 14
 - Other

- E. Bentonite seal, top ----- ft. MSL or 8 ft.
- F. Fine sand, top ----- ft. MSL or 2.5 ft.
- G. Filter pack, top ----- ft. MSL or 2.8 ft.
- H. Screen joint, top ----- ft. MSL or 3 ft.
- I. Well bottom ----- ft. MSL or 13 ft.
- J. Filter pack, bottom ----- ft. MSL or 14 ft.
- K. Borehole, bottom ----- ft. MSL or 14 ft.
- L. Borehole, diameter 8.25 in.
- M. O.D. well casing 2.40 in.
- N. I.D. well casing 2.06 in.

I hereby certify that the information on this form is true and correct to the best of my knowledge.

Signature Darrin Prentice Firm Geiss Soil & Samples LLC

Please complete both Forms 4400-113A and 4400-113B and return them to the appropriate DNR office and bureau. Completion of these reports is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file these forms may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on these forms is not intended to be used for any other purpose. NOTE: See the instructions for more information, including where the completed forms should be sent.

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

Facility/Project Name: Ellis Hand Car Wash
 Facility License, Permit or Monitoring No.: _____
 Facility ID: _____
 Type of Well: _____
 Well Code: 11, MW
 Distance from Waste/Source: _____ ft. Enf. Stds. Apply
 Local Grid Location of Well: _____ ft. N. _____ ft. E. _____ ft. S. _____ ft. W.
 Local Grid Origin (estimated:) or Well Location: _____
 Lat. _____ "Long. _____"
 Section Location of Waste/Source: _____ 1/4 of _____ 1/4 of Sec. _____ T. _____ N, R. _____
 Location of Well Relative to Waste/Source: u Upgradient s Sidegradient d Downgradient n Not Known
 Gov. Lot Number: _____
 Well Name: MW-2R
 Wjs. Unique Well No.: WB734 DNR Well ID No.: _____
 Date Well Installed: 08/13/2019
 Well Installed By: Name (first, last) and Firm: Darrin Prentice Geiss Soil & Samples

A. Protective pipe, top elevation _____ ft. MSL
 B. Well casing, top elevation _____ ft. MSL
 C. Land surface elevation _____ ft. MSL
 D. Surface seal, bottom _____ ft. MSL or _____ ft.

1. Cap and lock? Yes No
 2. Protective cover pipe:
 a. Inside diameter: 8 in.
 b. Length: 1 ft.
 c. Material: Steel 04
 Other
 d. Additional protection? Yes No
 If yes, describe: _____
 3. Surface seal: Bentonite 30
 Concrete 01
 Other
 4. Material between well casing and protective pipe: Bentonite 30
 Other
 5. Annular space seal:
 a. Granular/Chipped Bentonite 33
 b. _____ Lbs/gal mud weight ... Bentonite-sand slurry 35
 c. _____ Lbs/gal mud weight ... Bentonite slurry 31
 d. _____ % Bentonite ... Bentonite-cement grout 50
 e. _____ Ft³ volume added for any of the above
 f. How installed: Tremie 01
 Tremie pumped 02
 Gravity 08
 6. Bentonite seal:
 a. Bentonite granules 33
 b. 1/4 in. 3/8 in. 1/2 in. Bentonite chips 32
 c. _____ Other
 7. Fine sand material: Manufacturer, product name & mesh size
 a. #20 Red Flint
 b. Volume added _____ ft³
 8. Filter pack material: Manufacturer, product name & mesh size
 a. #40 Red Flint
 b. Volume added _____ ft³
 9. Well casing: Flush threaded PVC schedule 40 23
 Flush threaded PVC schedule 80 24
 Other
 10. Screen material: PVC
 a. Screen type: Factory cut 11
 Continuous slot 01
 Other
 b. Manufacturer Johnson
 c. Slot size: 0.010 in.
 d. Slotted length: 10 ft.
 11. Backfill material (below filter pack): None 14
 Other

12. USCS classification of soil near screen:
 GP GM GC GW SW SP
 SM SC ML MH CL CH
 Bedrock
 13. Sieve analysis performed? Yes No
 14. Drilling method used: Rotary 50
 Hollow Stem Auger 41
 Other
 15. Drilling fluid used: Water 02 Air 01
 Drilling Mud 03 None 99
 16. Drilling additives used? Yes No
 Describe _____
 17. Source of water (attach analysis, if required): _____

E. Bentonite seal, top _____ ft. MSL or 8 ft.
 F. Fine sand, top _____ ft. MSL or 2.5 ft.
 G. Filter pack, top _____ ft. MSL or 2.8 ft.
 H. Screen joint, top _____ ft. MSL or 3 ft.
 I. Well bottom _____ ft. MSL or 13 ft.
 J. Filter pack, bottom _____ ft. MSL or 14 ft.
 K. Borehole, bottom _____ ft. MSL or 14 ft.
 L. Borehole, diameter 8.25 in.
 M. O.D. well casing 2.40 in.
 N. I.D. well casing 2.06 in.

I hereby certify that the information on this form is true and correct to the best of my knowledge.
 Signature: Darrin Prentice Firm: Geiss Soil & Samples LLC

Please complete both Forms 4400-113A and 4400-113B and return them to the appropriate DNR office and bureau. Completion of these reports is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file these forms may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on these forms is not intended to be used for any other purpose. NOTE: See the instructions for more information, including where the completed forms should be sent.

SES Project Number 507.58

Facility/Project Name
Ellis Hand Car Wash

Local Grid Location of Well
ft. N. E. S. W.

Well Name
MW3

Facility License, Permit or Monitoring No.

Grid Origin Location (estimated:) Well Location
Lat. _____ Long. _____ or

Wis. Unique Well No. WA126 DNR Well Number _____

Facility ID _____

St. Plane _____ ft. N. _____ ft. E. S/C/N
Section Location of Waste/Source

Date Well Installed
03/15/2018
m m d d y y y y

Type of Well
Well Code 11 / MW

1/4 of _____ 1/4 of Sec. _____ T. _____ N, R. _____ E W

Well Installed By: Name (first,last) and Firm
Robert Rector

Distance From Waste/Source _____ ft.

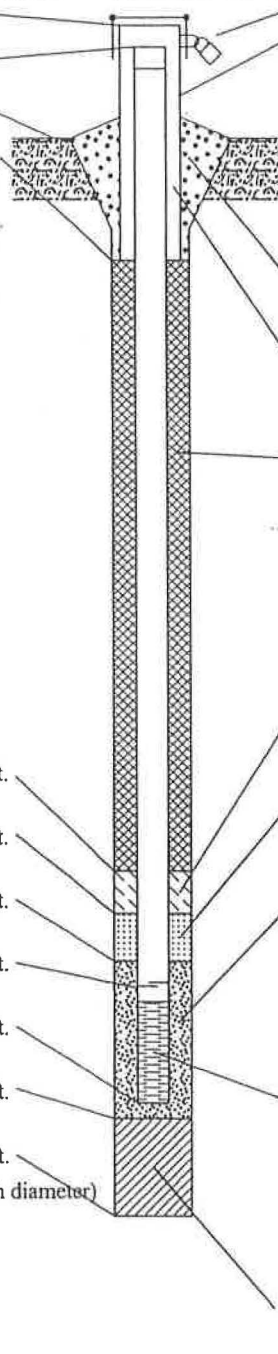
Enf. Stds. Apply

Location of Well Relative to Waste/Source
u Upgradient s Sidegradient
d Downgradient n Not Known

Gov. Lot Number _____

Soils & Engineering Services, Inc.

- A. Protective pipe, top elevation _____ ft. MSL
- B. Well casing, top elevation _____ ft. MSL
- C. Land surface elevation _____ ft. MSL
- D. Surface seal, bottom _____ ft. MSL or 1.6 ft.



- 1. Cap and lock? Yes No
- 2. Protective cover pipe:
 - a. Inside diameter: 10 in.
 - b. Length: 1.1 ft.
 - c. Material: Steel 04 Other
 - d. Additional protection? Yes No
 - If yes, describe: _____
- 3. Surface seal: Bentonite 30 Concrete 01 Other
- 4. Material between well casing and protective pipe: Filter Sand Bentonite 30 Other
- 5. Annular space seal:
 - a. Granular/Chipped Bentonite 33
 - b. _____ Lbs/gal mud weight . . . Bentonite-sand slurry 35
 - c. _____ Lbs/gal mud weight Bentonite slurry 31
 - d. _____ % Bentonite Bentonite-cement grout 50
 - e. 0.3 Ft³ volume added for any of the above
 - f. How installed: Tremie 01 Tremie pumped 02 Gravity 08
- 6. Bentonite seal:
 - a. Bentonite granules 33
 - b. 1/4 in. 3/8 in. 1/2 in. Bentonite chips 32
 - c. _____ Other
- 7. Fine sand material: Manufacturer, product name and mesh size
a. Red Flint #15
- b. Volume added 0.3 ft³
- 8. Filter pack material: Manufacturer, product name and mesh size
a. Red Flint #40
- b. Volume added 3.2 ft³
- 9. Well casing: Flush threaded PVC schedule 40 23
Flush threaded PVC schedule 80 24
Other
- 10. Screen material: Sch. 40 PVC
 - a. Screen Type: Factory cut 11
Continuous slot 01
Other
 - b. Manufacturer Monoflex
 - c. Slot size: 0.010 in.
 - d. Slotted length: 9.7 ft.
- 11. Backfill material (below filter pack): None 14
Other

- 12. USCS classification of soil near screen:
GP GM GC GW SW SP
SM SC ML MH CL CH
Bedrock
- 13. Sieve analysis attached? Yes No
- 14. Drilling method used: Rotary 50
Hollow Stem Auger 41
Other
- 15. Drilling fluid used: Water 02 Air 01
Drilling Mud 03 None 99
- 16. Drilling additives used? Yes No
Describe _____
- 17. Source of water (attach analysis):

- E. Bentonite seal, top _____ ft. MSL or 2.5 ft.
- F. Fine sand, top _____ ft. MSL or 2.5 ft.
- G. Filter pack, top _____ ft. MSL or 3.6 ft.
- H. Screen joint, top _____ ft. MSL or 3.9 ft.
- I. Well bottom _____ ft. MSL or 14.2 ft.
- J. Filter pack, bottom _____ ft. MSL or 15.0 ft.
- K. Borehole, bottom _____ ft. MSL or 15.0 ft.
(If multiple diameters, note diameters and to what depth for each diameter)
- L. Borehole, diameter 7.6 in.
- M. O.D. well casing 2.38 in.
- N. I.D. well casing 2.04 in.

I hereby certify that the information on this form is true and correct to the best of my knowledge.
Signature John E. Drickel Firm Soils & Engineering Services, Inc. Tel: (608) 274-760
1102 Stewart Street, Madison, Wisconsin 53713-4648 Fax: (608) 274-7571

Please complete both Forms 4400-113A and 4400-113B and return to the appropriate DNR office and bureau. Completion of these reports 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, 292, 293, 295, and 299, Wis. Stats., failure to file these forms may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on these forms is not intended to be used for any other purpose. NOTE: See the instructions for more information, including where the completed forms should be sent.

Route To: Watershed/Wastewater Waste Management
Remediation/Redevelopment Other

SES Project Number

Facility/Project Name Ellis Hand Car Wash	Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> S. <input type="checkbox"/> E. <input type="checkbox"/> W.	Well Name MW4
Facility License, Permit or Monitoring No.	Grid Origin Location <input type="checkbox"/> (estimated: <input type="checkbox"/>) Well Location <input type="checkbox"/>	Wis. Unique Well No. WA127 DNR Well Number
Facility ID	Lat. _____ Long. _____ or St. Plane _____ ft. N. _____ ft. E. S/C/N	Date Well Installed 03/14/2018
Type of Well Well Code 11 / mw	Section Location of Waste/Source _____ 1/4 of _____ 1/4 of Sec. _____ T. _____ N, R. _____ <input type="checkbox"/> E <input type="checkbox"/> W	Well Installed By: Name (first,last) and Firm Robert Rector
Distance From Waste/Source _____ ft.	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	Gov. Lot Number _____
Enf. Stds. Apply <input type="checkbox"/>		Soils & Engineering Services, Inc.

A. Protective pipe, top elevation _____ ft. MSL	1. Cap and lock? <input type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation _____ ft. MSL	2. Protective cover pipe: a. Inside diameter: <u>10</u> in. b. Length: <u>1.1</u> ft. c. Material: Steel <input checked="" type="checkbox"/> 04 Other <input type="checkbox"/>
C. Land surface elevation _____ ft. MSL	d. Additional protection? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, describe: _____
D. Surface seal, bottom _____ ft. MSL or <u>1.0</u> ft.	3. Surface seal: Bentonite <input type="checkbox"/> 30 Concrete <input checked="" type="checkbox"/> 01 Other <input type="checkbox"/>
12. USCS classification of soil near screen: GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/> SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input checked="" type="checkbox"/> CH <input type="checkbox"/> Bedrock <input type="checkbox"/>	4. Material between well casing and protective pipe: <u>Filter Sand</u> Bentonite <input type="checkbox"/> 30 Other <input checked="" type="checkbox"/>
13. Sieve analysis attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5. Annular space seal: a. Granular/Chipped Bentonite <input checked="" type="checkbox"/> 33 b. _____ Lbs/gal mud weight . . . Bentonite-sand slurry <input type="checkbox"/> 35 c. _____ Lbs/gal mud weight Bentonite slurry <input type="checkbox"/> 31 d. _____ % Bentonite Bentonite-cement grout <input type="checkbox"/> 50 e. <u>0.6</u> Ft ³ volume added for any of the above f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input checked="" type="checkbox"/> 08
14. Drilling method used: Rotary <input type="checkbox"/> 50 Hollow Stem Auger <input checked="" type="checkbox"/> 41 Other <input type="checkbox"/>	6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33 b. <input type="checkbox"/> 1/4 in. <input type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input type="checkbox"/> 32 c. _____ Other <input type="checkbox"/>
15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input type="checkbox"/> 01 Drilling Mud <input type="checkbox"/> 03 None <input checked="" type="checkbox"/> 99	7. Fine sand material: Manufacturer, product name and mesh size a. <u>Red Flint #15</u> b. Volume added <u>0.1</u> ft ³
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	8. Filter pack material: Manufacturer, product name and mesh size a. <u>Red Flint #40</u> b. Volume added <u>3.3</u> ft ³
Describe _____	9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23 Flush threaded PVC schedule 80 <input type="checkbox"/> 24 Other <input type="checkbox"/>
17. Source of water (attach analysis): _____	10. Screen material: <u>Sch. 40 PVC</u> a. Screen Type: Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> 01 Other <input type="checkbox"/>
E. Bentonite seal, top _____ ft. MSL or <u>3.0</u> ft.	b. Manufacturer <u>Monoflex</u> c. Slot size: <u>0.010</u> in. d. Slotted length: <u>9.7</u> ft.
F. Fine sand, top _____ ft. MSL or <u>3.0</u> ft.	11. Backfill material (below filter pack): None <input checked="" type="checkbox"/> 14 Other <input type="checkbox"/>
G. Filter pack, top _____ ft. MSL or <u>3.5</u> ft.	
H. Screen joint, top _____ ft. MSL or <u>4.1</u> ft.	
I. Well bottom _____ ft. MSL or <u>14.4</u> ft.	
J. Filter pack, bottom _____ ft. MSL or <u>15.0</u> ft.	
K. Borehole, bottom _____ ft. MSL or <u>15.0</u> ft.	
(If multiple diameters, note diameters and to what depth for each diameter)	
L. Borehole, diameter <u>7.6</u> in.	
M. O.D. well casing <u>2.38</u> in.	
N. I.D. well casing <u>2.04</u> in.	

I hereby certify that the information on this form is true and correct to the best of my knowledge.

Signature Shane E. Pischel

Firm **Soils & Engineering Services, Inc.** Tel: (608) 274-7601
1102 Stewart Street, Madison, Wisconsin 53713-4648 Fax: (608) 274-7511

Please complete both Forms 4400-113A and 4400-113B and return to the appropriate DNR office and bureau. Completion of these reports 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, 292, 293, 295, and 299, Wis. Stats., failure to file these forms may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on these forms may result in not intended to be used for any other purpose. NOTE: See the instructions for more information, including where the completed forms should be sent.

SES Project Number

Facility/Project Name

Ellis Hand Car Wash

Local Grid Location of Well

ft. N. E.
ft. S. W.

Well Name

MW5

Facility License, Permit or Monitoring No.

Grid Origin Location (estimated:)

Well Location

Wis. Unique Well No.

DNR Well Number

WA128

Facility ID

Lat. _____ Long. _____ or

Date Well Installed

03/14/2018

Type of Well

Well Code 11 / MW

Section Location of Waste/Source

1/4 of _____ 1/4 of Sec. _____ T. _____ N, R. _____ E W

Well Installed By: Name (first,last) and Firm

Robert Rector

Distance From Waste/Source _____ ft.

Enf. Stds. Apply

Location of Well Relative to Waste/Source
u Upgradient s Sidegradient
d Downgradient n Not Known

Gov. Lot Number

Soils & Engineering Services, Inc.

- A. Protective pipe, top elevation _____ ft. MSL
- B. Well casing, top elevation _____ ft. MSL
- C. Land surface elevation _____ ft. MSL
- D. Surface seal, bottom _____ ft. MSL or 1.1 ft.

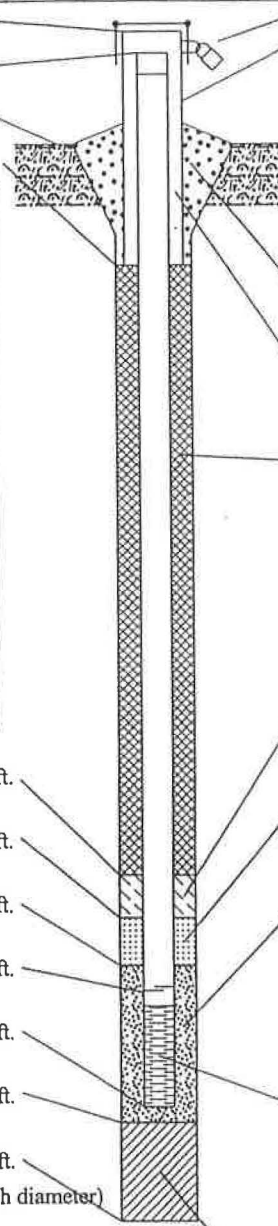
12. USCS classification of soil near screen:
GP GM GC GW SW SP
SM SC ML MH CL CH
Bedrock

13. Sieve analysis attached? Yes No
14. Drilling method used: Rotary 50
Hollow Stem Auger 41
Other
15. Drilling fluid used: Water 02 Air 01
Drilling Mud 03 None 99
16. Drilling additives used? Yes No

Describe _____

17. Source of water (attach analysis):

- E. Bentonite seal, top _____ ft. MSL or 2.9 ft.
- F. Fine sand, top _____ ft. MSL or 2.9 ft.
- G. Filter pack, top _____ ft. MSL or 3.5 ft.
- H. Screen joint, top _____ ft. MSL or 4.1 ft.
- I. Well bottom _____ ft. MSL or 14.4 ft.
- J. Filter pack, bottom _____ ft. MSL or 15.0 ft.
- K. Borehole, bottom _____ ft. MSL or 15.0 ft.
- (If multiple diameters, note diameters and to what depth for each diameter)
- L. Borehole, diameter 7.6 in.
- M. O.D. well casing 2.38 in.
- N. I.D. well casing 2.04 in.



1. Cap and lock? Yes No
2. Protective cover pipe:
a. Inside diameter: 10 in.
b. Length: 1.1 ft.
c. Material: Steel 04
Other
- d. Additional protection? Yes No
If yes, describe: _____
3. Surface seal: Bentonite 30
Concrete 01
Other
4. Material between well casing and protective pipe: Bentonite 30
Filter Sand Other
5. Annular space seal: a. Granular/Chipped Bentonite 33
b. _____ Lbs/gal mud weight . . . Bentonite-sand slurry 35
c. _____ Lbs/gal mud weight Bentonite slurry 31
d. _____ % Bentonite Bentonite-cement grout 50
e. 0.5 Ft³ volume added for any of the above
f. How installed: Tremie 01
Tremie pumped 02
Gravity 08
6. Bentonite seal: a. Bentonite granules 33
b. 1/4 in. 3/8 in. 1/2 in. Bentonite chips 32
c. _____ Other
7. Fine sand material: Manufacturer, product name and mesh size
a. Red Flint #15
b. Volume added 0.3 ft³
8. Filter pack material: Manufacturer, product name and mesh size
a. Red Flint #40
b. Volume added 3.3 ft³
9. Well casing: Flush threaded PVC schedule 40 23
Flush threaded PVC schedule 80 24
Other
10. Screen material: Sch. 40 PVC
a. Screen Type: Factory cut 11
Continuous slot 01
Other
- b. Manufacturer Monoflex
c. Slot size: 0.010 in.
d. Slotted length: 9.7 ft.
11. Backfill material (below filter pack): None 14
Other

I hereby certify that the information on this form is true and correct to the best of my knowledge.

Signature [Signature]

Firm Soils & Engineering Services, Inc. Tel: (608) 274-760
1102 Stewart Street, Madison, Wisconsin 53713-4648 Fax: (608) 274-751

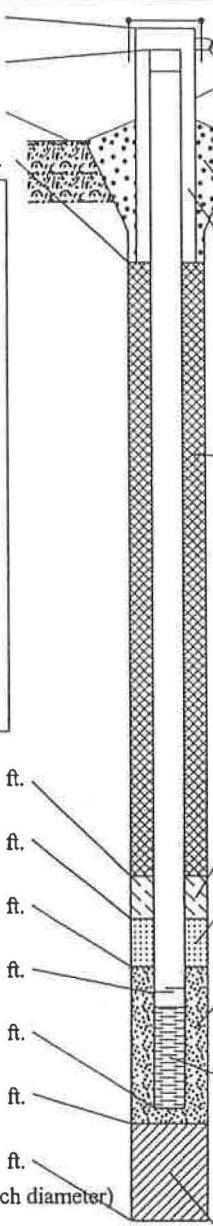
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Route To: Watershed/Wastewater Waste Management
Remediation/Redevelopment Other

SES Project Number

Facility/Project Name Ellis Hand car wash	Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> S. <input type="checkbox"/> E. <input type="checkbox"/> W.	Well Name MW6
Facility License, Permit or Monitoring No.	Grid Origin Location (estimated: <input type="checkbox"/>) Well Location <input type="checkbox"/>	Wis. Unique Well No. WA129 DNR Well Number
Facility ID	Lat. _____ Long. _____ or	Date Well Installed 03/14/2018 m m d d y y y y
Type of Well Well Code 11 / MW	St. Plane _____ ft. N. _____ ft. E. S/C/N	Well Installed By: Name (first,last) and Firm Robert Rector
Distance From Waste/Source _____ ft.	Section Location of Waste/Source 1/4 of _____ 1/4 of Sec. _____ T. _____ N, R. _____ <input type="checkbox"/> E <input type="checkbox"/> W	Soils & Engineering Services, Inc.
Enf. Stds. Apply <input type="checkbox"/>	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	

A. Protective pipe, top elevation _____ ft. MSL	1. Cap and lock? <input type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation _____ ft. MSL	2. Protective cover pipe: a. Inside diameter: 10 in. b. Length: 1.1 ft. c. Material: Steel <input checked="" type="checkbox"/> 0.4 Other <input type="checkbox"/>
C. Land surface elevation _____ ft. MSL	d. Additional protection? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, describe: _____
D. Surface seal, bottom _____ ft. MSL or 1.4 ft.	3. Surface seal: Bentonite <input type="checkbox"/> 3.0 Concrete <input checked="" type="checkbox"/> 0.1 Other <input type="checkbox"/>
12. USCS classification of soil near screen: GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/> SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input checked="" type="checkbox"/> CH <input type="checkbox"/> Bedrock <input type="checkbox"/>	4. Material between well casing and protective pipe: Bentonite <input type="checkbox"/> 3.0 Other <input checked="" type="checkbox"/> Filter Sand
13. Sieve analysis attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5. Annular space seal: a. Granular/Chipped Bentonite <input checked="" type="checkbox"/> 3.3 b. _____ Lbs/gal mud weight ... Bentonite-sand slurry <input type="checkbox"/> 3.5 c. _____ Lbs/gal mud weight ... Bentonite slurry <input type="checkbox"/> 3.1 d. _____ % Bentonite ... Bentonite-cement grout <input type="checkbox"/> 5.0 e. 0.5 Ft ³ volume added for any of the above f. How installed: Tremie <input type="checkbox"/> 0.1 Tremie pumped <input type="checkbox"/> 0.2 Gravity <input checked="" type="checkbox"/> 0.8
14. Drilling method used: Rotary <input type="checkbox"/> 5.0 Hollow Stem Auger <input checked="" type="checkbox"/> 4.1 Other <input type="checkbox"/>	6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 3.3 b. <input type="checkbox"/> 1/4 in. <input type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input type="checkbox"/> 3.2 c. _____ Other <input type="checkbox"/>
15. Drilling fluid used: Water <input type="checkbox"/> 0.2 Air <input type="checkbox"/> 0.1 Drilling Mud <input type="checkbox"/> 0.3 None <input checked="" type="checkbox"/> 9.9	7. Fine sand material: Manufacturer, product name and mesh size a. Red Flint #15 b. Volume added 0.1 ft ³
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	8. Filter pack material: Manufacturer, product name and mesh size a. Red Flint #40 b. Volume added 0.4 ft ³
Describe _____	9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 2.3 Flush threaded PVC schedule 80 <input type="checkbox"/> 2.4 Other <input type="checkbox"/>
17. Source of water (attach analysis): _____	10. Screen material: Sch. 40 PVC a. Screen Type: Factory cut <input checked="" type="checkbox"/> 1.1 Continuous slot <input type="checkbox"/> 0.1 Other <input type="checkbox"/>
E. Bentonite seal, top _____ ft. MSL or 3.0 ft.	b. Manufacturer Manoflex c. Slot size: 0.010 in. d. Slotted length: 9.7 ft.
F. Fine sand, top _____ ft. MSL or 3.0 ft.	11. Backfill material (below filter pack): None <input checked="" type="checkbox"/> 1.4 Other <input type="checkbox"/>
G. Filter pack, top _____ ft. MSL or 3.5 ft.	
H. Screen joint, top _____ ft. MSL or 3.9 ft.	
I. Well bottom _____ ft. MSL or 14.2 ft.	
J. Filter pack, bottom _____ ft. MSL or 15.0 ft.	
K. Borehole, bottom _____ ft. MSL or 15.0 ft.	
L. Borehole, diameter 7.6 in.	
M. O.D. well casing 2.38 in.	
N. I.D. well casing 2.04 in.	



I hereby certify that the information on this form is true and correct to the best of my knowledge.

Signature: [Signature] Firm: **Soils & Engineering Services, Inc.** Tel: (608) 274-7600
1102 Stewart Street, Madison, Wisconsin 53713-4648 Fax: (608) 274-7511

Complete both Forms 4400-113A and 4400-113B and return to the appropriate DNR office and bureau. Completion of these reports is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file these forms may result in a fine of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on these forms is not to be used for any other purpose. NOTE: See the instructions for more information, including where the completed forms should be sent.