

Letter of Transmittal

Submitted to:

Caroline Rice

WI Dept. of Natural Resources
3911 Fish Hatchery Rd
Madison WI 53711

Date:

6/15/2020

Attached

Job:

Pilsner Ford (Former)

Under Separate Cover

Contents:

Well Abandonment Forms for the Pilsner Ford (Former) site located at 207 West Street in Juneau, WI.
BRRTS #: 03-14-530057

Remarks:

Attached are the well abandonment forms for the above site as requested in your "Remaining Actions Needed...." letter dated 6/2/20. 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: Dianna Williams - Client

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 DODGE		WI Unique Well # of Removed Well WB738	Hicap #	Facility Name Pilsner Ford		Facility ID (FID or PWS) 114127970	
Latitude / Longitude (Degrees and Minutes) 43 ° 24.5 ' N		Method Code (see instructions)		License/Permit/Monitoring #			
88 ° 42.3 ' W				Original Well Owner Dianna Williams		Present Well Owner Dianna Williams	
1/4 SE	1/4 NE	Section 21	Township 11 N	Range 15	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Mailing Address of Present Owner 207 West Street	
Well Street Address 207 West Street				City of Present Owner Juneau			
Well City, Village or Town Juneau				Well ZIP Code 53039-		State WI	ZIP Code 53039-
Subdivision Name				Lot #			
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 type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy) 8/19/2019		Pump and piping removed?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Construction Type:		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 checked="" type="checkbox"/> Drilled				Screen removed?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
<input type="checkbox"/> Driven (Sandpoint)				Casing left in place?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<input type="checkbox"/> Dug				Was casing cut off below surface?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<input type="checkbox"/> Other (specify): _____				Did sealing material rise to surface?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Formation Type:				Did material settle after 24 hours?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
<input type="checkbox"/> Unconsolidated Formation		<input checked="" type="checkbox"/> Bedrock		If yes, was hole retopped?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Total Well Depth From Ground Surface (ft.) 15		Casing Diameter (in.) 2		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	
Lower Drillhole Diameter (in.) 6		Casing Depth (ft.) 6		Required Method of Placing Sealing Material			
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		If yes, to what depth (feet)? 4.4		Depth to Water (feet) 8.46		<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	
Medium Bentonite Chips	Surface	15	24	

6. Comments
MW-1R abandoned by METCO

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Ben Nelson (METCO)		License #	Date of Filling & Sealing (mm/dd/yyyy) 6/11/2020	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>Ben Nelson</i>	Date Signed 6/12/2020	

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 DODGE		WI Unique Well # of Removed Well VS852		Hicap #		Facility Name Pilsner Ford													
Latitude / Longitude (Degrees and Minutes) 43 ° 24.5 ' N 88 ° 42.3 ' W		Method Code (see instructions)		Facility ID (FID or PWS) 114127970		License/Permit/Monitoring #													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">¼ / ¼ SE</td> <td style="width: 25%;">¼ NE</td> <td style="width: 25%;">Section</td> <td style="width: 25%;">Township</td> <td style="width: 25%;">Range</td> <td style="width: 25%;">[X] E</td> </tr> <tr> <td>or Gov't Lot #</td> <td></td> <td>21</td> <td>11 N</td> <td>15</td> <td><input type="checkbox"/> W</td> </tr> </table>		¼ / ¼ SE	¼ NE	Section	Township	Range	[X] E	or Gov't Lot #		21	11 N	15	<input type="checkbox"/> W			Original Well Owner Dianna Williams		Present Well Owner Dianna Williams	
¼ / ¼ SE	¼ NE	Section	Township	Range	[X] E														
or Gov't Lot #		21	11 N	15	<input type="checkbox"/> W														
Well Street Address 207 West Street				Mailing Address of Present Owner 207 West Street															
Well City, Village or Town Juneau				Well ZIP Code 53039-															
Subdivision Name				City of Present Owner Juneau		State WI	ZIP Code 53039-												
Reason For Removal From Service Sampling Complete		WI Unique Well # of Replacement Well		4. Pump, Liner, Screen, Casing & Sealing Material															
<input type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy) 4/3/2017		Pump and piping removed?		<input type="checkbox"/> Yes	<input type="checkbox"/> No [X] 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 [X] N/A												
<input type="checkbox"/> Borehole / Drillhole				Screen removed?		<input type="checkbox"/> Yes [X]	<input type="checkbox"/> No 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 N/A												
Formation Type: <input type="checkbox"/> Unconsolidated Formation <input checked="" type="checkbox"/> Bedrock				Was casing cut off below surface?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No N/A												
Total Well Depth From Ground Surface (ft.) 16		Casing Diameter (in.) 2		Did sealing material rise to surface?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No N/A												
Lower Drillhole Diameter (in.) 6		Casing Depth (ft.) 6		Did material settle after 24 hours?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No N/A												
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown				If yes, was hole retopped?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No N/A												
If yes, to what depth (feet)? 4		Depth to Water (feet) 6.81		If bentonite chips were used, were they hydrated with water from a known safe source?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No N/A												
5. Material Used To Fill Well / Drillhole				Required Method of Placing Sealing Material															
				<input type="checkbox"/> Conductor Pipe-Gravity		<input type="checkbox"/> Conductor Pipe-Pumped													
Medium Bentonite Chips		Surface 16		<input type="checkbox"/> Screened & Poured (Bentonite Chips)		<input checked="" type="checkbox"/> Other (Explain): <u>Gravity</u>													
						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													
6. Comments				For Monitoring Wells and Monitoring Well Boreholes Only:															
MW-2 abandoned by METCO				<input checked="" type="checkbox"/> Bentonite Chips		<input type="checkbox"/> Bentonite - Cement Grout													
				<input type="checkbox"/> Granular Bentonite		<input type="checkbox"/> Bentonite - Sand Slurry													
7. Supervision of Work				DNR Use Only															
Name of Person or Firm Doing Filling & Sealing Ben Nelson (METCO)		License #	Date of Filling & Sealing (mm/dd/yyyy) 6/11/2020	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>Ben Nelson</i>		Date Signed 6/12/2020													

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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 type="checkbox"/> Remediation/Redevelopment
	<input type="checkbox"/> Waste Management	<input type="checkbox"/> Other: _____	

1. Well Location Information				2. Facility / Owner Information			
County DODGE		WI Unique Well # of Removed Well VS853		Hicap #		Facility Name Pilsner Ford	
Latitude / Longitude (Degrees and Minutes) 43 ° 24.5 ' N 88 ° 42.3 ' W		Method Code (see instructions)		Facility ID (FID or PWS) 114127970		License/Permit/Monitoring #	
¼/¼ SE	¼ NE	Section 21	Township 11 N	Range 15	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner Dianna Williams	
Well Street Address 207 West Street				Present Well Owner Dianna Williams			
Well City, Village or Town Juneau				Mailing Address of Present Owner 207 West Street			
Subdivision Name				Well ZIP Code 53039-		City of Present Owner Juneau	
				Lot #		State WI	
						ZIP Code 53039-	

Reason For Removal From Service Sampling Complete		WI Unique Well # of Replacement Well		4. Pump, Liner, Screen, Casing & Sealing Material			
<input type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy) 4/3/2017		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 type="checkbox"/> Unconsolidated Formation <input checked="" 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.) 16		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.) 6		Casing Depth (ft.) 6		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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown				If bentonite chips were used, were they hydrated with water from a known safe source?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
If yes, to what depth (feet)? 4		Depth to Water (feet) 7.8		Required Method of Placing Sealing Material			
5. Material Used To Fill Well / Drillhole				<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped			
Medium Bentonite Chips		From (ft.) Surface		To (ft.) 16		lbs 25.6	
				<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain): <u>Gravity</u>			
				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			

From (ft.)	To (ft.)	lbs
Surface	16	25.6

6. Comments
MW-3 abandoned by METCO

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Ben Nelson (METCO)		License #	Date of Filling & Sealing (mm/dd/yyyy) 6/11/2020	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>Ben Nelson</i>	Date Signed 6/12/2020	

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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 type="checkbox"/> Remediation/Redevelopment
	<input type="checkbox"/> Waste Management	<input type="checkbox"/> Other:	

1. Well Location Information				2. Facility / Owner Information			
County DODGE		WI Unique Well # of Removed Well VS850		Hicap #		Facility Name Pilsner Ford	
Latitude / Longitude (Degrees and Minutes) 43 ° 24.5 ' N 88 ° 42.3 ' W		Method Code (see instructions)		Facility ID (FID or PWS) 114127970		License/Permit/Monitoring #	
1/4 SE or Gov't Lot #		Section 21	Township 11 N	Range 15	<input checked="" type="checkbox"/> E <input type="checkbox"/> W		
Well Street Address 207 West Street				Original Well Owner Dianna Williams			
Well City, Village or Town Juneau				Present Well Owner Dianna Williams			
Subdivision Name				Mailing Address of Present Owner 207 West Street			
Well ZIP Code 53039-				City of Present Owner Juneau		State WI	ZIP Code 53039-

Reason For Removal From Service Sampling Complete		WI Unique Well # 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 type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy) 4/3/2017		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			
<input type="checkbox"/> Borehole / Drillhole				Casing left in place? <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):				Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Formation Type: <input type="checkbox"/> Unconsolidated Formation <input checked="" type="checkbox"/> Bedrock				Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Total Well Depth From Ground Surface (ft.) 16		Casing Diameter (in.) 2		Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
Lower Drillhole Diameter (in.) 6		Casing Depth (ft.) 6		If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown				If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
If yes, to what depth (feet)? 4		Depth to Water (feet) 8.47		Required Method of Placing Sealing Material			

5. Material Used To Fill Well / Drillhole				Required Method of Placing Sealing Material			
Medium Bentonite Chips		From (ft.) Surface	To (ft.) 16	lbs 25.6		<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
Medium Bentonite Chips	Surface	16	25.6

6. Comments
MW-4 abandoned by METCO

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Ben Nelson (METCO)		License #	Date of Filling & Sealing (mm/dd/yyyy) 6/11/2020	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>Ben Nelson</i>	Date Signed 6/12/2020	

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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 type="checkbox"/> Remediation/Redevelopment
		<input type="checkbox"/> Waste Management	<input type="checkbox"/> Other: _____	

1. Well Location Information	2. Facility / Owner Information
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County DODGE	WI Unique Well # of Removed Well ____ VS875_	Hicap #	Facility Name Pilsner Ford
Latitude / Longitude (Degrees and Minutes) 43 ° 24.5 ' N 88 ° 42.3 ' W			Facility ID (FID or PWS) 114127970
Method Code (see instructions)			License/Permit/Monitoring #
1/4 SE or Gov't Lot #	1/4 NE	Section 21	Township 11 N
		Range 15	Range [X] E [] W
Well Street Address 207 West Street			Original Well Owner Dianna Williams
Well City, Village or Town Juneau			Present Well Owner Dianna Williams
Well ZIP Code 53039-			Mailing Address of Present Owner 207 West Street
Subdivision Name			City of Present Owner Juneau
Lot #			State WI
			ZIP Code 53039-

Reason For Removal From Service Sampling Complete	WI Unique Well # of Replacement Well
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3. Well / Drillhole / Borehole Information	4. Pump, Liner, Screen, Casing & Sealing Material
--------------------------------------------	---------------------------------------------------

<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole	Original Construction Date (mm/dd/yyyy) 11/10/2017	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 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
Construction Type: <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): <u>Gravity</u>
Formation Type: <input type="checkbox"/> Unconsolidated Formation <input checked="" type="checkbox"/> Bedrock		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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		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
If yes, to what depth (feet)? 2.5		Depth to Water (feet) 9.53

5. Material Used To Fill Well / Drillhole	From (ft.)	To (ft.)	lbs
Medium Bentonite Chips	Surface	15	24

6. Comments

MW-5 abandoned by METCO

7. Supervision of Work	DNR Use Only
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Name of Person or Firm Doing Filling & Sealing Ben Nelson (METCO)	License #	Date of Filling & Sealing (mm/dd/yyyy) 6/11/2020	Date Received	Noted By
Street or Route 709 Gillette St., ste.3			Telephone Number (608) 781-8879	
City La Crosse			Signature of Person Doing Work <i>Ben Nelson</i>	
State WI			Date Signed 6/12/2020	
ZIP Code 54603-				

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.

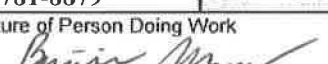
<input type="checkbox"/> Verification Only of Fill and Seal	Route to:	<input type="checkbox"/> Drinking Water	<input type="checkbox"/> Watershed/Wastewater	<input type="checkbox"/> Remediation/Redevelopment
		<input type="checkbox"/> Waste Management	<input type="checkbox"/> Other: _____	

1. Well Location Information				2. Facility / Owner Information			
County DODGE		WI Unique Well # of Removed Well VS876	Hicap #	Facility Name Pilsner Ford		Facility ID (FID or PWS) 114127970	
Latitude / Longitude (Degrees and Minutes) 43 ° 24.5 ' N 88 ° 42.3 ' W		Method Code (see instructions)		License/Permit/Monitoring #			
¼ / ¼ SE or Gov't Lot #	¼ NE	Section 21	Township 11 N	Range 15	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner Dianna Williams	
Well Street Address 207 West Street				Present Well Owner Dianna Williams			
Well City, Village or Town Juneau				Mailing Address of Present Owner 207 West Street			
Subdivision Name				Well ZIP Code 53039-		City of Present Owner Juneau	
				State WI		ZIP Code 53039-	

Reason For Removal From Service Sampling Complete	WI Unique Well # 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 type="checkbox"/> Monitoring Well		Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Water Well		Screen removed?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
<input type="checkbox"/> Borehole / Drillhole		Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Original Construction Date (mm/dd/yyyy) 11/10/2017		Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
If a Well Construction Report is available, please attach.		Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Construction Type:		Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
<input checked="" type="checkbox"/> Drilled		If yes, was hole retopped?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Driven (Sandpoint)		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
<input type="checkbox"/> Dug		Required Method of Placing Sealing Material			
<input type="checkbox"/> Other (specify): _____		<input type="checkbox"/> Conductor Pipe-Gravity			
Formation Type:		<input type="checkbox"/> Conductor Pipe-Pumped			
<input type="checkbox"/> Unconsolidated Formation		<input type="checkbox"/> Screened & Poured (Bentonite Chips)			
<input checked="" type="checkbox"/> Bedrock		<input checked="" type="checkbox"/> Other (Explain): <u>Gravity</u>			
Total Well Depth From Ground Surface (ft.) 15		Sealing Materials			
Casing Diameter (in.) 2		<input type="checkbox"/> Neat Cement Grout			
Lower Drillhole Diameter (in.) 6		<input type="checkbox"/> Sand-Cement (Concrete) Grout			
Casing Depth (ft.) 5		<input type="checkbox"/> Concrete			
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)			
If yes, to what depth (feet)? 2.5		<input type="checkbox"/> Bentonite-Sand Slurry " "			
Depth to Water (feet) 9.02		<input type="checkbox"/> Bentonite Chips			
		For Monitoring Wells and Monitoring Well Boreholes Only:			
		<input checked="" type="checkbox"/> Bentonite Chips			
		<input type="checkbox"/> Granular Bentonite			
		<input type="checkbox"/> Bentonite - Cement Grout			
		<input type="checkbox"/> Bentonite - Sand Slurry			

5. Material Used To Fill Well / Drillhole	From (ft.)	To (ft.)	lbs	
Medium Bentonite Chips	Surface	15	24	

6. Comments
MW-6 abandoned by METCO

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Ben Nelson (METCO)		License #	Date of Filling & Sealing (mm/dd/yyyy) 6/11/2020	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 6/12/2020	

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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 DODGE		WI Unique Well # of Removed Well WB757	Hicap #	Facility Name Pilsner Ford		Facility ID (FID or PWS) 114127970	
Latitude / Longitude (Degrees and Minutes) 43 ° 24.5 ' N 88 ° 42.3 ' W		Method Code (see instructions)		License/Permit/Monitoring #		Original Well Owner Dianna Williams	
¼/¼ SE	¼ NE	Section 21	Township 11 N	Range 15	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Present Well Owner Dianna Williams	
Well Street Address 207 West Street				Mailing Address of Present Owner 207 West Street			
Well City, Village or Town Juneau				Well ZIP Code 53039-		City of Present Owner Juneau	
Subdivision Name				Lot #		State WI	ZIP Code 53039-

Reason For Removal From Service Sampling Complete	WI Unique Well # 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 type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole		Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Original Construction Date (mm/dd/yyyy) 12/18/2019		Screen removed?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If a Well Construction Report is available, please attach.		Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____		Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Formation Type: <input type="checkbox"/> Unconsolidated Formation <input checked="" type="checkbox"/> Bedrock		Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft.) 17	Casing Diameter (in.) 2	Did material settle after 24 hours? If yes, was hole retopped?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
Lower Drillhole Diameter (in.) 6	Casing Depth (ft.) 6.1	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
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet) 10.16	Required Method of Placing Sealing Material			
If yes, to what depth (feet)? 4.5		<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>			

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"/> Concrete		<input type="checkbox"/> Bentonite-Sand Slurry " "	
<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"/> Bentonite - Sand Slurry	
<input type="checkbox"/> Granular Bentonite					

5. Material Used To Fill Well / Drillhole			From (ft.)	To (ft.)	lbs
Medium Bentonite Chips	Surface	17		27.2	

6. Comments
MW-8 abandoned by METCO

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Ben Nelson (METCO)	License #	Date of Filling & Sealing (mm/dd/yyyy) 6/11/2020	Date Received	Noted By	
Street or Route 709 Gillette St., ste.3	Telephone Number (608) 781-8879	Comments		Signature of Person Doing Work <i>Ben Nelson</i>	
City La Crosse	State WI	ZIP Code 54603-	Date Signed 6/12/2020		

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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 type="checkbox"/> Remediation/Redevelopment
	<input type="checkbox"/> Waste Management	<input type="checkbox"/> Other: _____	

1. Well Location Information				2. Facility / Owner Information			
County DODGE		WI Unique Well # of Removed Well WB756		Hicap #		Facility Name Pilsner Ford	
Latitude / Longitude (Degrees and Minutes) 43 ° 24.5 ' N 88 ° 42.3 ' W				Facility ID (FID or PWS) 114127970			
Method Code (see instructions)				License/Permit/Monitoring #			
1/4 SE or Gov't Lot #		Section 21		Township 11 N		Range 15	
						<input checked="" type="checkbox"/> E <input type="checkbox"/> W	
Well Street Address 207 West Street				Original Well Owner Dianna Williams			
Well City, Village or Town Juneau				Present Well Owner Dianna Williams			
Well ZIP Code 53039-				Mailing Address of Present Owner 207 West Street			
Subdivision Name				City of Present Owner Juneau		State WI	
Lot #				ZIP Code 53039-			

Reason For Removal From Service Sampling Complete		WI Unique Well # of Replacement Well	
3. Well / Drillhole / Borehole Information		Original Construction Date (mm/dd/yyyy) 12/17/2019	
<input type="checkbox"/> Monitoring Well <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 type="checkbox"/> Unconsolidated Formation <input checked="" type="checkbox"/> Bedrock			
Total Well Depth From Ground Surface (ft.) 45		Casing Diameter (in.) 2	
Lower Drillhole Diameter (in.) 6		Casing Depth (ft.) 40	
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown			
If yes, to what depth (feet)? 35.8		Depth to Water (feet) 12.11	

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 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
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	
Surface	45	72	Medium Bentonite Chips

6. Comments
PZ-8 abandoned by METCO

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Ben Nelson (METCO)		License #	Date of Filling & Sealing (mm/dd/yyyy) 6/11/2020	Date Received	Noted By
Street or Route 709 Gillette St., stc.3			Telephone Number (608) 781-8879	Comments	
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work <i>Ben Nelson</i>	Date Signed 6/12/2020	