

Letter of Transmittal

Submitted to:

Tim Zeichert

WI Dept. of Natural Resources

101 S. Webster St.

Madison WI 53707 7921

PO BOX 7921

Date:

12/11/2019

☒ Attached

Job:

Capitol Auto Sales & Service/BV's

☒ Under Separate Cover

Contents:

Well Abandonment Forms

BRRTS #: 03-41-545023

PECFA #: 53216-2054-10-A

Remarks:

Attached are the well abandonment forms for the above site as requested in the "Remaining Actions Needed....." letter dated 11/25/19. All wells have been properly abandoned and no investigative waste remains on-site. Closure packet revisions have been submitted. Following your review of these forms please send the "Final Closure" letter to our client and copy METCO.

If you have any questions please call or email.

Signed: Jason Powell

cc: Hazim Farrah - Farrah Group, LLC

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

Well / Drillhole / Borehole Filling & Sealing

Form 3300-005 (R 4/08)

Page 1 of 2

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:

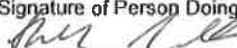
☐ Drinking Water

☐ Watershed/Wastewater

☒ Remediation/Redevelopment

☐ Waste Management

☐ Other: _____

| 1. Well Location Information | | | | 2. Facility / Owner Information | | | |
|---|--------------------|--|--|---|---|--------------------|---------------------------|
| County MILWAUKEE | | WI Unique Well # of Removed Well _____ | Hicap # _____ | Facility Name Capitol Auto Sales | | | |
| Latitude / Longitude (Degrees and Minutes) 43 ° 5.4 ' N 88 ° 0.12 ' W | | Method Code (see instructions) _____ | | Facility ID (FID or PWS) 341124630 | | | |
| 1/4 SE 1/4 SW or Gov't Lot # | | Section 3 | Township 7 N | Range 21 | <input checked="" type="checkbox"/> E <input type="checkbox"/> W | | |
| Well Street Address 7210 W Capitol Drive | | | | Original Well Owner Hazim Farrah | | | |
| Well City, Village or Town Milwaukee | | | | Present Well Owner Hazim Farrah | | | |
| Subdivision Name _____ | | | | Mailing Address of Present Owner 7210 W Capitol Drive | | | |
| Well ZIP Code 53216- | | | | City of Present Owner Milwaukee | | State WI | ZIP Code 53216- |
| 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) 4/5/2006 | | | | | |
| | | If a Well Construction Report is available, please attach. _____ | | | | | |
| Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____ | | | | | | | |
| Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock | | | | | | | |
| Total Well Depth From Ground Surface (ft.) 15 | | Casing Diameter (in.) 2 | | | | | |
| Lower Drillhole Diameter (in.) 4.85 | | Casing Depth (ft.) 5 | | | | | |
| Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown | | | | | | | |
| If yes, to what depth (feet)? 5 | | Depth to Water (feet) 4.53 | | | | | |
| 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 relogged? | | <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 | | | | | | | |
| Bentonite Chips | | From (ft.) Surface | To (ft.) 15 | lbs 24 | | | |
| | | | | | | | |
| | | | | | | | |
| 6. Comments | | | | | | | |
| Monitoring Well MW-1 | | | | | | | |
| 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) 12/5/2019 | | 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 12/10/2019 | | |

Well / Drillhole / Borehole Filling & Sealing

Form 3300-005 (R 4/08)

Page 1 of 2

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☐ Verification Only of Fill and Seal

Route to:

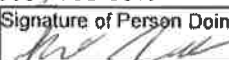
☐ Drinking Water

☐ Watershed/Wastewater

☒ Remediation/Redevelopment

☐ Waste Management

☐ Other: _____

| | | | | | | | |
|--|--------------------|---|--|---|--|---|---------------------------|
| 1. Well Location Information | | | | 2. Facility / Owner Information | | | |
| County MILWAUKEE | | WI Unique Well # of Removed Well _____ | | Hicap # _____ | | Facility Name Capitol Auto Sales | |
| Latitude / Longitude (Degrees and Minutes) 43 ° 5.4 ' N 88 ° 0.12 ' W | | Method Code (see instructions) _____ | | Facility ID (FID or PWS) 341124630 | | License/Permit/Monitoring # _____ | |
| 1/4 SE 1/4 SW or Gov't Lot # | | Section 3 | Township 7 N | Range 21 E | Original Well Owner Hazim Farrah | | |
| Well Street Address 7210 W Capitol Drive | | | | | | Present Well Owner Hazim Farrah | |
| Well City, Village or Town Milwaukee | | Well ZIP Code 53216- | | | | Mailing Address of Present Owner 7210 W Capitol Drive | |
| Subdivision Name _____ | | Lot # _____ | | City of Present Owner Milwaukee | | State WI | ZIP Code 53216- |
| 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 <input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole | | Original Construction Date (mm/dd/yyyy) 4/5/2006 | | 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 | | | |
| | | If a Well Construction Report is available, please attach. _____ | | 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): _____ | | | | | |
| 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): Gravity | | | |
| Total Well Depth From Ground Surface (ft.) 20 | | Casing Diameter (in.) 2 | | Sealing Materials <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry <input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite Chips | | | |
| Lower Drillhole Diameter (in.) 4.85 | | Casing Depth (ft.) 5 | | 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 | | | |
| Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown | | | | | | | |
| If yes, to what depth (feet)? 3 | | Depth to Water (feet) 4.59 | | | | | |
| 5. Material Used To Fill Well / Drillhole | | | | | | | |
| Bentonite Chips | | From (ft.) Surface | To (ft.) 20 | lbs 32 | | | |
| | | | | | | | |
| | | | | | | | |
| 6. Comments | | | | | | | |
| Monitoring Well MW-2 | | | | | | | |
| 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) 12/5/2019 | | 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 12/10/2019 | | |

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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

| | | |
|---|---|---|
| County MILWAUKEE | WI Unique Well # of Removed Well _____ | Hicap # _____ |
| Latitude / Longitude (Degrees and Minutes) 43 ° 5.4 ' N 88 ° 0.12 ' W | | Method Code (see instructions) _____ |
| 1/4 SE 1/4 SW or Gov't Lot # | Section 3 | Township 7 N 21 E |
| Well Street Address 7210 W Capitol Drive | | Well ZIP Code 53216- |
| Well City, Village or Town Milwaukee | | Well ZIP Code 53216- |
| Subdivision Name | | Lot # _____ |

2. Facility / Owner Information

| | | |
|--|-------------|--------------------|
| Facility Name Capitol Auto Sales | | |
| Facility ID (FID or PWS) 341124630 | | |
| License/Permit/Monitoring # _____ | | |
| Original Well Owner Hazim Farrah | | |
| Present Well Owner Hazim Farrah | | |
| Mailing Address of Present Owner 7210 W Capitol Drive | | |
| City of Present Owner Milwaukee | State WI | ZIP Code 53216- |

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) 4/5/2006 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:

☒ Unconsolidated Formation ☐ Bedrock

Total Well Depth From Ground Surface (ft.)
22

Casing Diameter (in.)
2

Lower Drillhole Diameter (in.)
4.85

Casing Depth (ft.)
7

Was well annular space grouted? ☒ Yes ☐ No ☐ Unknown

If yes, to what depth (feet)?
5

Depth to Water (feet)
5.8

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 relogged? | <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

☐ Conductor Pipe-Gravity ☐ Conductor Pipe-Pumped
☐ Screened & Poured (Bentonite Chips) ☒ Other (Explain): Gravity

Sealing Materials

☐ Neat Cement Grout ☐ Clay-Sand Slurry (11 lb./gal. wt.)
☐ Sand-Cement (Concrete) Grout ☐ Bentonite-Sand Slurry " "
☐ Concrete ☐ Bentonite Chips

For Monitoring Wells and Monitoring Well Boreholes Only:

☒ Bentonite Chips ☐ Bentonite - Cement Grout
☐ Granular Bentonite ☐ Bentonite - Sand Slurry

5. Material Used To Fill Well / Drillhole

| | From (ft.) | To (ft.) | lbs |
|-----------------|------------|----------|------|
| Bentonite Chips | Surface | 22 | 35.2 |
| | | | |
| | | | |

6. Comments

Monitoring Well MW-3

7. Supervision of Work

| 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) 12/5/2019 | 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 12/10/2019 |

Well / Drillhole / Borehole Filling & Sealing

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Route to:

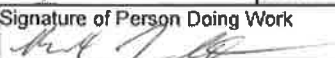
☐ Drinking Water

☐ Watershed/Wastewater

☒ Remediation/Redevelopment

☐ Waste Management

☐ Other: _____

| 1. Well Location Information | | | | | 2. Facility / Owner Information | | | | | | | | | | | | | | | | |
|---|----------|---|--|---|--|--|--|----------------------------------|--|------------|----------|-----|---------|----|------|--|--|--|--|--|--|
| County MILWAUKEE | | WI Unique Well # of Removed Well _____ | | Hicap # _____ | | Facility Name Capitol Auto Sales | | | | | | | | | | | | | | | |
| Latitude / Longitude (Degrees and Minutes) 43 ° 5.4 ' N 88 ° 0.12 ' W | | Method Code (see instructions) _____ | | | | Facility ID (FID or PWS) 341124630 | | | | | | | | | | | | | | | |
| License/Permit/Monitoring # _____ | | Original Well Owner Hazim Farrah | | Present Well Owner Hazim Farrah | | Mailing Address of Present Owner 7210 W Capitol Drive | | | | | | | | | | | | | | | |
| Well Street Address 7210 W Capitol Drive | | Well City, Village or Town Milwaukee | | Well ZIP Code 53216- | | City of Present Owner Milwaukee | | State WI | | | | | | | | | | | | | |
| Subdivision Name _____ | | Lot # _____ | | ZIP Code 53216- | | | | | | | | | | | | | | | | | |
| 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 | | Original Construction Date (mm/dd/yyyy) 4/5/2006 | | Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Monitoring 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"/> 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 | | | | | | | | | | | | | | | | | |
| 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 checked="" type="checkbox"/> Unconsolidated Formation <input 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.) 23 | | 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.) 4.85 | | Casing Depth (ft.) 11 | | If yes, was hole relapped? <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)? 7 | | Depth to Water (feet) 10.57 | | 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 | | | | | | | | | | | | | | | | | |
| 5. Material Used To Fill Well / Drillhole | | | | 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 | | | | | | | | | | | | | | | | | |
| | | | | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>From (ft.)</th> <th>To (ft.)</th> <th>lbs</th> </tr> <tr> <td>Surface</td> <td>23</td> <td>36.8</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table> | | | | | | From (ft.) | To (ft.) | lbs | Surface | 23 | 36.8 | | | | | | |
| From (ft.) | To (ft.) | lbs | | | | | | | | | | | | | | | | | | | |
| Surface | 23 | 36.8 | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |
| 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) 12/5/2019 | | 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 12/10/2019 | | | | | | | | | | | | | |