

Letter of Transmittal

Submitted to:

Dee Lance

WI Dept. of Natural Resources
473 Griffith Avenue
Wisconsin Rapids WI 54494

Date: 6/19/2017	<input checked="" type="radio"/> Attached
Job: Affordable Auto Care	<input checked="" type="radio"/> Under Separate Cover

Contents: Well Abandonment Forms. BRRTS #: 03-29-555679

Remarks:

Attached are the well abandonment forms as requested in your "Remaining Actions Needed" letter dated 5/8/17. No investigative waste remains on-site. Once you have reviewed this information please forward the "Final Closure" letter to the RP and METCO.

If you have any questions please call or email.

Signed: Jason Powell

cc: James Walker - 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 JUNEAU	WI Unique Well # of Removed Well ____ VN778	Hicap #
Latitude / Longitude (Degrees and Minutes) 43 ° 52.8 ' N 90 ° 9.98 ' W		Method Code (see instructions)
1/4 SE or Gov't Lot #	Section 8	Township 16 N
		Range 3 E
Well Street Address 115 N. Adams Street		Well ZIP Code 53950-
Well City, Village or Town New Lisbon		Lot #
Subdivision Name		

Facility Name Affordable Auto Care		
Facility ID (FID or PWS) 701058270		
License/Permit/Monitoring #		
Original Well Owner James Walker		
Present Well Owner James Walker		
Mailing Address of Present Owner W8215 County Rd B		
City of Present Owner New Lisbon	State WI	ZIP Code 54603-

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) 11/4/2014
<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): _____	

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 checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

Formation Type:

Unconsolidated Formation Bedrock

Total Well Depth From Ground Surface (ft.) Casing Diameter (in.)
13 2

Lower Drillhole Diameter (in.) Casing Depth (ft.)
6 3

Was well annular space grouted? Yes No Unknown

If yes, to what depth (feet)? Depth to Water (feet)
2.5 9.45

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

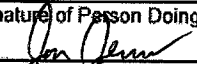
5. Material Used To Fill Well / Drillhole

Material	From (ft.)	To (ft.)	Lbs.
Bentonite chips	Surface	13	21

6. Comments

Monitoring Well MW-1

7. Supervision of Work **DNR Use Only**

Name of Person or Firm Doing Filling & Sealing Jon Jensen/METCO	License #	Date of Filling & Sealing (mm/dd/yyyy) 6/8/2017	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 6/8/2017

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: **JUNEAU** WI Unique Well # of Removed Well: **VN777** Hicap #: _____

Latitude / Longitude (Degrees and Minutes):
43 ° 52.8 ' N
90 ° 9.98 ' W

Method Code (see instructions): _____

1/4 SE 1/4 SW Section: **8** Township: **16 N** Range: **3** E W

Well Street Address: **115 N. Adams Street**

Well City, Village or Town: **New Lisbon** Well ZIP Code: **53950-**

Subdivision Name: _____ Lot #: _____

Facility Name: **Affordable Auto Care**

Facility ID (FID or PWS): **701058270**

License/Permit/Monitoring #: _____

Original Well Owner: **James Walker**

Present Well Owner: **James Walker**

Mailing Address of Present Owner: **W8215 County Rd B**

City of Present Owner: **New Lisbon** State: **WI** ZIP Code: **54603-**

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): **11/3/2014**
 Water Well
 Borehole / Drillhole If a Well Construction Report is available, please attach.

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.): **32** Casing Diameter (in.): **2**

Lower Drillhole Diameter (in.): **6** Casing Depth (ft.): **27**

Was well annular space grouted? Yes No Unknown

If yes, to what depth (feet)? **23** Depth to Water (feet): **16.01**

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

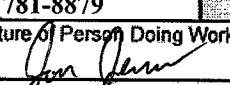
5. Material Used To Fill Well / Drillhole

	From (ft.)	To (ft.)	Lbs.
Bentonite chips	Surface	32	51

6. Comments

Piezometer PZ-1

7. Supervision of Work **DNR Use Only**

Name of Person or Firm Doing Filling & Sealing Jon Jensen/METCO	License #	Date of Filling & Sealing (mm/dd/yyyy) 6/8/2017	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 6/8/2017

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 JUNEAU	WI Unique Well # of Removed Well ____VN779_	Hicap #	Facility Name Affordable Auto Care
Latitude / Longitude (Degrees and Minutes) 43 ° 52.8 ' N 90 ° 9.98 ' W	Method Code (see instructions)		Facility ID (FID or PWS) 701058270
¼ SE ¼ SW or Gov't Lot #	Section 8	Township 16 N	Range [X] E 3 [] W
Well Street Address 115 N. Adams Street			Original Well Owner James Walker
Well City, Village or Town New Lisbon			Present Well Owner James Walker
Subdivision Name			Mailing Address of Present Owner W8215 County Rd B
Well ZIP Code 53950-			City of Present Owner New Lisbon
Lot #			State WI
Reason For Removal From Service Sampling Complete			ZIP Code 54603-
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) 11/3/2014	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
If a Well Construction Report is available, please attach.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <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): _____	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: <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	
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	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)? 36	Depth to Water (feet) 15.81	

5. Material Used To Fill Well / Drillhole	From (ft.)	To (ft.)	Lbs.
Bentonite chips	Surface	45	72

6. Comments
Piezometer PZ-2

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Jon Jensen/METCO	License #	Date of Filling & Sealing (mm/dd/yyyy) 6/8/2017	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>Jon Jensen</i>	Date Signed 6/8/2017