



June 17, 2020

Mr. Lee Delcore
Wisconsin Department of Natural Resources
1155 Pilgrim Road
Plymouth, WI 53073


**Re: Monitoring Well Abandonment
 Suggar Property
 3301 – 60th Street
 Kenosha, WI 53144
 PECFA# 53144-4143-05
 BRRTS# 03-30-004964
 FID# 230156410**

Dear Mr. Delcore:

Midwest Environmental Consulting (MEC) has properly abandoned all of the groundwater monitoring wells at the above referenced site. The abandonment forms are attached.

If you have any questions or need additional information please contact me at (262) 237-4351.

Sincerely,



Sean Cranley, P.G.
Principal Hydrogeologist

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, 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 DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

1. Well Location Information				2. Facility / Owner Information			
County <i>Kenosha</i>		WI Unique Well # of Removed Well		Hicap #		Facility Name <i>Sugar Property</i>	
Latitude / Longitude (see instructions) N _____ W _____		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS) <i>230156410</i>	
1/4 NE 1/4 NW or Gov't Lot #		Section <i>1</i>		Township <i>1 N</i>		Range <i>22</i>	
						<input checked="" type="checkbox"/> E <input type="checkbox"/> W	
Well Street Address <i>3301-60th Street</i>				Original Well Owner <i>AI Auto Repair</i>			
Well City, Village or Town <i>Kenosha, WI</i>				Well ZIP Code <i>53144</i>			
Subdivision Name				Lot #			
Reason for Removal from Service <i>Case Closure</i>				WI Unique Well # of Replacement Well			
Present Well Owner <i>As Above</i>				Mailing Address of Present Owner <i>3301-60th Street</i>			
City of Present Owner <i>Kenosha</i>				State <i>WI</i>		ZIP Code <i>53144</i>	

3. Filled & Sealed Well / Drillhole / Borehole Information		4. Pump, Liner, Screen, Casing & Sealing Material			
<input checked="" type="checkbox"/> Monitoring Well		Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
<input type="checkbox"/> Water Well		Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
<input type="checkbox"/> Borehole / Drillhole		Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
Original Construction Date (mm/dd/yyyy) <i>5/14/18</i>		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:		Was casing cut off below surface? <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		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 checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Total Well Depth From Ground Surface (ft.) <i>16</i>		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			
Casing Diameter (in.) <i>2</i>		Required Method of Placing Sealing Material			
Lower Drillhole Diameter (in.) <i>8</i>		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped			
Casing Depth (ft.) <i>16</i>		<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____			
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		Sealing Materials			
If yes, to what depth (feet)? <i>1</i>		<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete			
Depth to Water (feet) <i>9</i>		<input type="checkbox"/> Sand-Cement (Concrete) Grout <input checked="" 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.)	
<i>0</i>		<i>16</i>	
No. Yards, Sacks Sealant or Volume (circle one)		Mix Ratio or Mud Weight	

6. Comments

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>		License #		Date Received	
Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>				Noted By	
Street or Route <i>N6395 E. Paradise Rd.</i>		Telephone Number <i>(262) 237-4351</i>		Comments	
City <i>Burlington</i>		State <i>WI</i>		Date Signed <i>6/17/2020</i>	
ZIP Code <i>53105</i>		Signature of Person Doing Work <i>Sean Cranley</i>			

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, 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 DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

1. Well Location Information			2. Facility / Owner Information		
County <i>Kenosha</i>	WI Unique Well # of Removed Well	Hicap #	Facility Name <i>Suggar Property</i>		

Latitude / Longitude (see instructions) N _____ W _____	Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS) <i>230156410</i>
$\frac{1}{4}$ NE $\frac{1}{4}$ NW or Gov't Lot #			License/Permit/Monitoring # <i>MW-2</i>

Section <i>1</i>	Township <i>1 N</i>	Range <i>22</i>	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner <i>A1 Auto Repair</i>
Well Street Address <i>3301-60th Street</i>				Present Well Owner <i>As Above</i>

Well City, Village or Town <i>Kenosha, WI</i>	Well ZIP Code <i>53144</i>	Mailing Address of Present Owner <i>3301-60th Street</i>	
Subdivision Name	Lot #	City of Present Owner <i>Kenosha</i>	State ZIP Code <i>WI 53144</i>

Reason for Removal from Service <i>Case Closure</i>	WI Unique Well # of Replacement Well	4. Pump, Liner, Screen, Casing & Sealing Material	
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3. Filled & Sealed Well / Drillhole / Borehole Information		Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <i>5/14/18</i>	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.	Liner(s) perforated? <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:		Casing left in place? <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
Formation Type:		Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<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.) <i>16</i>	Casing Diameter (in.) <i>2</i>	Required Method of Placing Sealing Material
Lower Drillhole Diameter (in.) <i>8</i>	Casing Depth (ft.) <i>16</i>	<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____

If yes, to what depth (feet)? <i>1</i>	Depth to Water (feet) <i>10</i>	Sealing Materials
For Monitoring Wells and Monitoring Well Boreholes Only:		<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete
		<input type="checkbox"/> Sand-Cement (Concrete) Grout <input checked="" type="checkbox"/> Bentonite Chips
		<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			
<i>Bentonite chips</i>	From (ft.) <i>0</i>	To (ft.) <i>16</i>	No. Yards, Sacks Sealant or Volume (circle one)
			Mix Ratio or Mud Weight

6. Comments

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>	Date Received	Noted By
Street or Route <i>N6395 E. Paradise Rd.</i>	Telephone Number <i>(262) 237-4351</i>	Comments		
City <i>Burlington</i>	State <i>WI</i>	ZIP Code <i>53105</i>	Signature of Person Doing Work <i>Sean Cranley</i>	Date Signed <i>6/17/2020</i>

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, 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 DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

1. Well Location Information				2. Facility / Owner Information			
County <i>Kenosha</i>		WI Unique Well # of Removed Well		Hicap #		Facility Name <i>Sugar Property</i>	
Latitude / Longitude (see instructions) N _____ W _____		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID) or PWS <i>230156410</i>	
1/4 NE 1/4 NW or Gov't Lot #		Section <i>1</i>		Township <i>1 N</i>		Range <i>22</i> <input checked="" type="checkbox"/> E <input type="checkbox"/> W	
Well Street Address <i>3301-60th Street</i>				Original Well Owner <i>A1 Auto Repair</i>			
Well (City), Village or Town <i>Kenosha, WI</i>				Well ZIP Code <i>53144</i>			
Subdivision Name				Lot #		Present Well Owner <i>As Above</i>	
Reason for Removal from Service <i>Case Closure</i>				WI Unique Well # of Replacement Well			
Mailing Address of Present Owner <i>3301-60th Street</i>		City of Present Owner <i>Kenosha</i>		State <i>WI</i>		ZIP Code <i>53144</i>	

3. Filled & Sealed 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		Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
Original Construction Date (mm/dd/yyyy) <i>5/14/18</i>		Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
If a Well Construction Report is available, please attach.		Liner(s) perforated? <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): _____		Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Total Well Depth From Ground Surface (ft.) <i>16</i>		Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Casing Diameter (in.) <i>2</i>		Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Lower Drillhole Diameter (in.) <i>8</i>		Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
Casing Depth (ft.) <i>16</i>		If yes, was hole retopped? <input type="checkbox"/> Yes <input 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
If yes, to what depth (feet)? <i>1</i>		Required Method of Placing Sealing Material			
Depth to Water (feet) <i>10</i>		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____			

5. Material Used to Fill Well / Drillhole			
<i>Bentonite Chips</i>		From (ft.) <i>0</i>	To (ft.) <i>16</i>
		No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight

6. Comments

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>	Date Received	Noted By
Street or Route <i>N6395 E. Paradise Rd.</i>			Telephone Number <i>(262) 237-4351</i>	Comments	
City <i>Burlington</i>	State <i>WI</i>	ZIP Code <i>53105</i>	Signature of Person Doing Work <i>Sean Cranley</i>	Date Signed <i>6/17/2020</i>	

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

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Verification Only of Fill and Seal

Route to DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

1. Well Location Information			2. Facility / Owner Information		
County <i>Kenosha</i>	WI Unique Well # of Removed Well	Hicap #	Facility Name <i>Sugar Property</i>	Facility ID (FID or PWS) <i>230156410</i>	
Latitude / Longitude (see instructions) N _____ W _____	Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	License/Permit/Monitoring # <i>MW-4</i>	Original Well Owner <i>AI Auto Repair</i>	
$\frac{1}{4}$ NE $\frac{1}{4}$ NW or Gov't Lot #	Section <i>1</i>	Township <i>1 N</i>	Range <i>22</i>	Present Well Owner <i>As Above</i>	
Well Street Address <i>3301-60th Street</i>			Mailing Address of Present Owner <i>3301-60th Street</i>		
Well (City), Village or Town <i>Kenosha, WI</i>		Well ZIP Code <i>53144</i>		City of Present Owner <i>Kenosha</i>	
Subdivision Name		Lot #		State <i>WI</i>	ZIP Code <i>53144</i>

Reason for Removal from Service <i>Case Closure</i>	WI Unique Well # of Replacement Well	4. Pump, Liner, Screen, Casing & Sealing Material			
3. Filled & Sealed Well / Drillhole / Borehole Information		Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <i>5/15/18</i>	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.	Liner(s) perforated?	<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:		Casing left in place?	<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	Was casing cut off below surface?		
Other (specify): _____			<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?	
Total Well Depth From Ground Surface (ft.) <i>16</i>		Casing Diameter (in.) <i>2</i>		<input checked="" type="checkbox"/> Yes	
Lower Drillhole Diameter (in.) <i>8</i>		Casing Depth (ft.) <i>16</i>		Did material settle after 24 hours?	
Was well annular space grouted?		<input checked="" type="checkbox"/> Yes		<input type="checkbox"/> No	<input type="checkbox"/> Unknown
If yes, to what depth (feet)? <i>1</i>		Depth to Water (feet) <i>10</i>		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"/> 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 checked="" type="checkbox"/> Screened & Poured (Bentonite Chips)			
		<input type="checkbox"/> Other (Explain): _____			
		Sealing Materials			
		<input type="checkbox"/> Neat Cement Grout			
		<input type="checkbox"/> Concrete			
		<input type="checkbox"/> Sand-Cement (Concrete) Grout			
		<input checked="" 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.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
<i>Bentonite Chips</i>		<i>0</i>	<i>16</i>		

6. Comments

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>	Date Received	Noted By
Street or Route <i>N6395 E. Paradise Rd.</i>		Telephone Number <i>(262) 237-4351</i>	Comments	
City <i>Burlington</i>	State <i>WI</i>	ZIP Code <i>53105</i>	Signature of Person Doing Work <i>Sean Cranley</i>	Date Signed <i>6/17/2020</i>

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

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Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

1. Well Location Information			2. Facility / Owner Information		
County <i>Kenosha</i>	WI Unique Well # of Removed Well	Hicap #	Facility Name <i>Suggar Property</i>		

Latitude / Longitude (see instructions) _____ N _____ W	Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS) <i>230156410</i>	License/Permit/Monitoring # <i>MW-5</i>	
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¼ 1/4 NE ¼ NW or Gov't Lot #	Section <i>1</i>	Township <i>1 N</i>	Range <i>22</i>	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner <i>AI Auto Repair</i>
Well Street Address <i>3301-60th Street</i>					Present Well Owner <i>As Above</i>

Well (City), Village or Town <i>Kenosha, WI</i>	Well ZIP Code <i>53144</i>	Mailing Address of Present Owner <i>3301-60th Street</i>		
Subdivision Name	Lot #	City of Present Owner <i>Kenosha</i>	State <i>WI</i>	ZIP Code <i>53144</i>

Reason for Removal from Service <i>Case Closure</i>	WI Unique Well # of Replacement Well	4. Pump, Liner, Screen, Casing & Sealing Material		
--	--------------------------------------	---	--	--

3. Filled & Sealed Well / Drillhole / Borehole Information		Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <i>5/15/18</i>	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.	Liner(s) perforated? <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:			Was casing cut off below surface? <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	Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Other (specify): _____			Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Formation Type:			If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock			If bentonite chips were used, were they hydrated with water from a known safe source? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

Total Well Depth From Ground Surface (ft.) <i>16</i>	Casing Diameter (in.) <i>2</i>	Required Method of Placing Sealing Material	
Lower Drillhole Diameter (in.) <i>8</i>	Casing Depth (ft.) <i>16</i>	<input type="checkbox"/> Conductor Pipe-Gravity	<input type="checkbox"/> Conductor Pipe-Pumped
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____	

If yes, to what depth (feet)? <i>1</i>	Depth to Water (feet) <i>11</i>	Sealing Materials	
5. Material Used to Fill Well / Drillhole <i>Bentonite Chips</i>		<input type="checkbox"/> Neat Cement Grout	<input type="checkbox"/> Concrete
From (ft.) <i>0</i>	To (ft.) <i>16</i>	<input type="checkbox"/> Sand-Cement (Concrete) Grout	<input checked="" type="checkbox"/> Bentonite Chips
No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight	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

6. Comments			
7. Supervision of Work			
Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>	DNR Use Only
Street or Route <i>N6395 E. Paradise Rd.</i>	Telephone Number <i>(262) 237-4351</i>	Comments	Date Received
City <i>Burlington</i>	State <i>WI</i>	ZIP Code <i>53105</i>	Noted By
Signature of Person Doing Work <i>Sean Cranley</i>			Date Signed <i>6/17/2020</i>

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, 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 DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

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

County <i>Kenosha</i>		WI Unique Well # of Removed Well	Hicap #	Facility Name <i>Sugar Property</i>	
Latitude / Longitude (see instructions) N _____ W _____		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS) <i>230156410</i>	
1/4 NE 1/4 NW or Gov't Lot #		Section <i>1</i>	Township <i>1 N</i>	Range <i>22</i>	License/Permit/Monitoring # <i>MW-6</i>
Well Street Address <i>3301-60th Street</i>		Original Well Owner <i>AI Auto Repair</i>		Present Well Owner <i>As Above</i>	
Well City/Village or Town <i>Kenosha, WI</i>		Well ZIP Code <i>53144</i>		Mailing Address of Present Owner <i>3301-60th Street</i>	
Subdivision Name		Lot #		City of Present Owner <i>Kenosha</i>	State <i>WI</i>
Reason for Removal from Service <i>Case Closure</i>		WI Unique Well # of Replacement Well		ZIP Code <i>53144</i>	

3. Filled & Sealed Well / Drillhole / Borehole Information **4. Pump, Liner, Screen, Casing & Sealing Material**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <i>12/11/18</i>	<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.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input type="checkbox"/> Borehole / Drillhole		<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): _____		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Total Well Depth From Ground Surface (ft.) <i>18</i>	Casing Diameter (in.) <i>2</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Lower Drillhole Diameter (in.) <i>8</i>	Casing Depth (ft.) <i>18</i>	<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	Depth to Water (feet) <i>12</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, to what depth (feet)? <i>5</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

5. Material Used to Fill Well / Drillhole	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
<i>Bentonite Chips</i>	<i>0</i>	<i>18</i>		

6. Comments

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>	Date Received	Noted By
Street or Route <i>N6395 E. Paradise Rd.</i>		Telephone Number <i>(262) 237-4351</i>	Comments	
City <i>Burlington</i>	State <i>WI</i>	ZIP Code <i>53105</i>	Signature of Person Doing Work <i>Sean Cranley</i>	Date Signed <i>6/17/2020</i>

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, 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 DNR Bureau:

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

1. Well Location Information			2. Facility / Owner Information		
County <i>Kenosha</i>		WI Unique Well # of Removed Well	Hicap #	Facility Name <i>Suggar Property</i>	
Latitude / Longitude (see instructions) _____ N _____ W		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS) <i>230156410</i>	
1/4 1/4 <i>NE</i> 1/4 <i>NW</i> or Gov't Lot #		Section <i>1</i>	Township <i>1 N</i>	Range <i>22</i>	License/Permit/Monitoring # <i>MW-7</i>
				<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner <i>A1 Auto Repair</i>
Well Street Address <i>3301 - 60th Street</i>			Present Well Owner <i>As Above</i>		
Well (City), Village or Town <i>Kenosha, WI</i>		Well ZIP Code <i>53144</i>		Mailing Address of Present Owner <i>3301 - 60th Street</i>	
Subdivision Name		Lot #		City of Present Owner <i>Kenosha</i>	State <i>WI</i>
				ZIP Code <i>53144</i>	
3. Filled & Sealed Well / Drillhole / Borehole Information			4. Pump, Liner, Screen, Casing & Sealing Material		
Reason for Removal from Service <i>Case Closure</i>		WI Unique Well # of Replacement Well		Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input checked="" type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy) <i>12/11/18</i>		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.		Liner(s) perforated? <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.) <i>18</i>		Casing Diameter (in.) <i>2</i>		Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Lower Drillhole Diameter (in.) <i>8</i>		Casing Depth (ft.) <i>18</i>		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 yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, to what depth (feet)? <i>4.5</i>		Depth to Water (feet) <i>11</i>		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			Required Method of Placing Sealing Material		
<i>Bentonite chips</i>			From (ft.)		To (ft.)
			<i>0</i>		<i>18</i>
			No. Yards, Sacks Sealant or Volume (circle one)		Mix Ratio or Mud Weight

6. Comments		

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>	Date Received	Noted By
Street or Route <i>N6395 E. Paradise Rd.</i>			Telephone Number <i>(262) 237-4351</i>	Comments	
City <i>Burlington</i>	State <i>WI</i>	ZIP Code <i>53105</i>	Signature of Person Doing Work <i>Sean Cranley</i>	Date Signed <i>6/17/2020</i>	

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, 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 DNR Bureau:		
	<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 <i>Kenosha</i>	WI Unique Well # of Removed Well	Hicap #	Facility Name <i>Suggar Property</i>		
Latitude / Longitude (see instructions)		Format Code	Facility ID (FID or PWS) <i>230156410</i>		
		Method Code	License/Permit/Monitoring # <i>MW-8</i>		
		<input type="checkbox"/> DD			
		<input type="checkbox"/> SCR002			
		<input type="checkbox"/> DDM			
		<input type="checkbox"/> GPS008			
		<input type="checkbox"/> OTH001			

1/4 NE	1/4 NW	Section <i>1</i>	Township <i>1 N</i>	Range <i>22</i>	<input checked="" type="checkbox"/> E	<input type="checkbox"/> W	Original Well Owner <i>A1 Auto Repair</i>		
or Gov't Lot #							Present Well Owner <i>As Above</i>		
Well Street Address <i>3301 - 60th Street</i>							Mailing Address of Present Owner <i>3301 - 60th Street</i>		
Well (City), Village or Town <i>Kenosha, WI</i>				Well ZIP Code <i>53144</i>				City of Present Owner <i>Kenosha</i>	
Subdivision Name				Lot #		State <i>WI</i>		ZIP Code <i>53144</i>	

Reason for Removal from Service <i>Case Closure</i>	WI Unique Well # of Replacement Well
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3. Filled & Sealed Well / Drillhole / Borehole Information		4. Pump, Liner, Screen, Casing & Sealing Material			
<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <i>4/3/08</i>	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		Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
Construction Type:		Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
<input checked="" type="checkbox"/> Drilled		Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
<input type="checkbox"/> Driven (Sandpoint)		Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
<input type="checkbox"/> Dug		Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
<input type="checkbox"/> Other (specify): _____		Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
Formation Type:		If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
<input checked="" type="checkbox"/> Unconsolidated Formation		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 type="checkbox"/> Bedrock		Required Method of Placing Sealing Material			
Total Well Depth From Ground Surface (ft.) <i>17.5</i>		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped			
Casing Diameter (in.) <i>2</i>		<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____			
Lower Drillhole Diameter (in.) <i>8</i>		Sealing Materials			
Casing Depth (ft.) <i>17.5</i>		<input type="checkbox"/> Neat Cement Grout <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"/> Sand-Cement (Concrete) Grout <input checked="" type="checkbox"/> Bentonite Chips			
If yes, to what depth (feet)? <i>1</i>		For Monitoring Wells and Monitoring Well Boreholes Only:			
Depth to Water (feet) <i>10</i>		<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.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
<i>Bentonite chips</i>		<i>0</i>	<i>17.5</i>		

6. Comments	

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>	Date Received	Noted By	
Street or Route <i>N6395 E. Paradise Rd.</i>	Telephone Number <i>(262) 237-4351</i>		Comments		
City <i>Burlington</i>	State <i>WI</i>	ZIP Code <i>53105</i>	Signature of Person Doing Work <i>Sean Cranley</i>		Date Signed <i>6/17/2020</i>

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, 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 DNR Bureau:

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

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

County <i>Kenosha</i>		WI Unique Well # of Removed Well		Hicap #		Facility Name <i>Suggar Property</i>			
Latitude / Longitude (see instructions) N _____ W _____		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FJD or PWS) <i>230156410</i>			
1/4 1/4 <i>NE</i> 1/4 <i>NW</i> or Gov't Lot #		Section <i>1</i>		Township <i>1 N</i>		Range <i>22</i>		License/Permit/Monitoring # <i>MW-9</i>	
Well Street Address <i>3301-60th Street</i>		Original Well Owner <i>A1 Auto Repair</i>				Present Well Owner <i>As Above</i>			
Well (City, Village or Town) <i>Kenosha, WI</i>		Well ZIP Code <i>53144</i>				Mailing Address of Present Owner <i>3301-60th Street</i>			
Subdivision Name		Lot #		City of Present Owner <i>Kenosha</i>		State <i>WI</i>		ZIP Code <i>53144</i>	

3. Filled & Sealed Well / Drillhole / Borehole Information **4. Pump, Liner, Screen, Casing & Sealing Material**

Reason for Removal from Service <i>Case Closure</i>		WI Unique Well # of Replacement Well		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 Liner(s) perforated? <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"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy) <i>1/14/2020</i>		Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____							
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.		Sealing Materials <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete <input type="checkbox"/> Sand-Cement (Concrete) Grout <input checked="" 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							
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Total Well Depth From Ground Surface (ft.) <i>20</i>		Casing Diameter (in.) <i>2</i>		Lower Drillhole Diameter (in.) <i>8</i>		Casing Depth (ft.) <i>20</i>		Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)? <i>1</i>		Depth to Water (feet) <i>12</i>									

5. Material Used to Fill Well / Drillhole			
From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
<i>0</i>	<i>20</i>		
<i>Bentonite Chips</i>			

6. Comments

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>	Date Received	Noted By
Street or Route <i>N6395 E. Paradise Rd.</i>		Telephone Number <i>(262) 237-4351</i>	Comments	
City <i>Burlington</i>	State <i>WI</i>	ZIP Code <i>53109</i>	Signature of Person Doing Work <i>Sean Cranley</i>	Date Signed <i>6/17/2020</i>