

March 21, 2018



Wisconsin Department of Natural Resources  
Oshkosh Office  
625 East County Road Y, Suite 700  
Oshkosh, Wisconsin 54901

Attention: Ms. Jennifer Borski  
Phone: (920) 424-7887  
E-mail: Jennifer.Borski@wisconsin.gov

Re: **Monitoring Well Abandonment Documentation**  
Ahlgrimm Explosives Co Inc – Prill Area  
W9899 Givens Road  
Hortonville, Wisconsin  
BRRTS #02-45-558037  
Terracon Project No. 58127001

Dear Ms. Borski:

On February 16, 2018, Terracon Consultants, Inc. (Terracon) received an email from the Wisconsin Department of Natural Resources (WDNR), formally communicating permission to abandon the monitoring wells associated with the above-referenced site. Terracon abandoned the 10 monitoring wells on March 6, 2018. Terracon is submitting the following per WDNR's request:

- n Well/Drillhole/Borehole Filling & Sealing Form 3300-005 (for each well)

Please contact us if you have questions regarding this case.

Sincerely,

The Terracon logo is repeated here in a smaller size, maintaining the same bold, dark red font style.

Paul A. Lenaker  
Senior Staff Geologist

Attachments: Well/Drillhole/Borehole Filling & Sealing Form 3300-005

Cc: Mr. John Ahlgrimm (electronic only)



Terracon Consultants, Inc. 9856 South 57<sup>th</sup> Street Franklin, Wisconsin 53132  
P [414] 423 0255 F [414] 423 0566 terracon.com

Geotechnical



Environmental



Construction Materials



Facilities

**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**

|   |                      |  |  |
|---|----------------------|--|--|
| County<br><b>Outagamie</b>                                    |                      | WI Unique Well # of Removed Well   | Hicap #  |
| Latitude / Longitude (see instructions)<br>_____ N<br>_____ W |                      | Format Code<br><input type="checkbox"/> DD<br><input type="checkbox"/> DDM | Method Code<br><input type="checkbox"/> GPS008<br><input type="checkbox"/> SCR002<br><input type="checkbox"/> OTH001 |
| 1/4 1/4 <b>SW</b> 1/4 <b>NE</b>                               | Section<br><b>33</b> | Township<br><b>22 N</b>  | Range <input checked="" type="checkbox"/> <b>E</b> <input type="checkbox"/> <b>W</b>                                 |
| Well Street Address<br><b>W9899 Givens Road</b>               |                      |  |  |
| Well City, Village or Town<br><b>Hortonville</b>              |                      | Well ZIP Code<br><b>54944</b>  |  |
| Subdivision Name  |                      | Lot #  |  |
| Reason for Removal from Service<br><b>Closure</b>             |                      | WI Unique Well # of Replacement Well                                       |  |

**2. Facility / Owner Information**

|  |                    |                          |
|--|--------------------|--------------------------|
| Facility Name<br><b>Ahlgrimm Explosives Co Inc - Pull Area</b>   |                    |                          |
| Facility ID (FID or PWS)   |                    |                          |
| License/Permit/Monitoring #                                      |                    |                          |
| Original Well Owner  |                    |                          |
| Present Well Owner<br><b>John Ahlgrimm</b>                       |                    |                          |
| Mailing Address of Present Owner<br><b>1829 Ravenswood Court</b> |                    |                          |
| City of Present Owner<br><b>Appleton</b>                         | State<br><b>WI</b> | ZIP Code<br><b>54913</b> |

**3. Filled & Sealed Well / Drillhole / Borehole Information**

|   |  |
|---|--|
| <input checked="" type="checkbox"/> Monitoring Well   | Original Construction Date (mm/dd/yyyy)<br><b>12/17/14</b> |
| <input type="checkbox"/> Water Well <b>MW-1</b>   | If a Well Construction Report is available, please attach. |
| <input type="checkbox"/> Borehole / Drillhole   |  |
| Construction Type:<br><input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug<br><input checked="" type="checkbox"/> Other (specify): <b>Air Rotary</b> |  |
| Formation Type:<br><input type="checkbox"/> Unconsolidated Formation <input checked="" type="checkbox"/> Bedrock  |  |
| Total Well Depth From Ground Surface (ft.)<br><b>29.5</b>   | Casing Diameter (in.)<br><b>2</b>                          |
| Lower Drillhole Diameter (in.)<br><b>6</b>  | Casing Depth (ft.)<br><b>29.5</b>                          |
| Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown  |  |
| If yes, to what depth (feet)?   | Depth to Water (feet)<br><b>16.35</b>                      |

**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 |
| 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 |
| 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 |
|------------|-------------|---|-------------------------|
| Surface    | <b>29.5</b> | <b>~1 bag</b>                                   |                         |

**6. Comments**

**Overdrill 2" casing using 3.5" hammer bit to 8 feet bgs.**

**7. Supervision of Work**

|   |   |   |                              |          |
|---|---|---|------------------------------|----------|
| Name of Person or Firm Doing Filling & Sealing<br><b>Paul Benaker</b> | License #                                 | Date of Filling & Sealing or Verification (mm/dd/yyyy)<br><b>3/6/18</b> | <b>DNR-Use Only</b>          |          |
| Street or Route<br><b>9856 S. 57th Street</b>                         | Telephone Number<br><b>(414) 423-0255</b> | Date Received   |                              | Noted By |
| City<br><b>Franklin</b>   | State<br><b>WI</b>                        | ZIP Code<br><b>53132</b>  | Comments                     |          |
| Signature of Person Doing Work<br><b>PA</b>                           |   |   | Date Signed<br><b>3/6/18</b> |          |

|   |  |  |
|---|--|--|
| Facility/Project Name<br><u>Ahlgriem Explosives</u> | Local Grid Location of Well<br>_____ ft. <input type="checkbox"/> N. _____ ft. <input type="checkbox"/> E.<br>_____ ft. <input type="checkbox"/> S. _____ ft. <input type="checkbox"/> W.                  | Well Name<br>MW1   |
| Facility License, Permit or Monitoring No.          | Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Well Location <input type="checkbox"/><br>Lat. _____ " Long. _____ " or _____ " or _____ "                            | Wis. Unique Well No. _____ DNR Well ID No. _____                                 |
| Facility ID   | St. Plane _____ ft. N. _____ ft. E. S/C/N  | Date Well Installed<br><u>12/17/2014</u><br>m m d d y y v v v v                  |
| Type of Well<br>Well Code _____ / _____             | Section Location of Waste/Source<br>1/4 of _____ 1/4 of Sec. _____ T. _____ N, R. _____ <input type="checkbox"/> E<br><input type="checkbox"/> W   | Well Installed By: Name (first, last) and Firm<br><u>Kyle@Chris-Groundsource</u> |
| Distance from Waste/<br>Source _____ ft.            | Location of Well Relative to Waste/Source<br>u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient<br>d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known | Gov. Lot Number _____<br>Paul Lenakar-Terracon                                   |

|   |  |
|---|--|
| A. Protective pipe, top elevation _____ ft. MSL   | 1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
| B. Well casing, top elevation _____ ft. MSL   | 2. Protective cover pipe:<br>a. Inside diameter: <u>Flushmount</u> in.<br>b. Length: _____ ft.<br>c. Material: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> 04<br><input type="checkbox"/> Other <input type="checkbox"/>  |
| C. Land surface elevation _____ ft. MSL   | d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, describe: _____   |
| D. Surface seal, bottom _____ ft. MSL or _____ ft.  | 3. Surface seal: <input type="checkbox"/> Bentonite <input type="checkbox"/> 30<br><input checked="" type="checkbox"/> Concrete <input type="checkbox"/> 01<br><input type="checkbox"/> Other <input type="checkbox"/>   |
| 12. USCS classification of soil near screen:<br>GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/><br>SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/><br>Bedrock <input checked="" type="checkbox"/> | 4. Material between well casing and protective pipe:<br><input type="checkbox"/> Bentonite <input type="checkbox"/> 30<br><input type="checkbox"/> Other <input type="checkbox"/>  |
| 13. Sieve analysis performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   | 5. Annular space seal:<br>a. Granular/Chipped Bentonite <input type="checkbox"/> 33<br>b. _____ Lbs/gal mud weight ... Bentonite-sand slurry <input type="checkbox"/> 35<br>c. _____ Lbs/gal mud weight ... Bentonite slurry <input type="checkbox"/> 31<br>d. _____ % Bentonite ... Bentonite-cement grout <input type="checkbox"/> 50<br>e. _____ Ft <sup>3</sup> volume added for any of the above<br>f. How installed: <input type="checkbox"/> Tremie <input type="checkbox"/> 01<br><input type="checkbox"/> Tremie pumped <input type="checkbox"/> 02<br><input type="checkbox"/> Gravity <input type="checkbox"/> 08 |
| 14. Drilling method used: Rotary <input type="checkbox"/> 50<br>Hollow Stem Auger <input type="checkbox"/> 41<br><u>Air Rotary</u> Other <input checked="" type="checkbox"/>  | 6. Bentonite seal:<br>a. Bentonite granules <input type="checkbox"/> 33<br>b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 32<br>c. _____ Other <input type="checkbox"/>  |
| 15. Drilling fluid used: Water <input checked="" type="checkbox"/> 02 Air <input type="checkbox"/> 01<br>Drilling Mud <input type="checkbox"/> 03 None <input type="checkbox"/> 99  | 7. Fine sand material: Manufacturer, product name & mesh size<br>a. <u>#15 red flint</u><br>b. Volume added <u>0.5 bags ft<sup>3</sup></u>   |
| 16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Describe _____  | 8. Filter pack material: Manufacturer, product name & mesh size<br>a. <u>#15 Red Flint</u><br>b. Volume added <u>4.5 bags ft<sup>3</sup></u>   |
| 17. Source of water (attach analysis, if required): _____   | 9. Well casing: <input checked="" type="checkbox"/> Flush threaded PVC schedule 40 <input type="checkbox"/> 23<br><input type="checkbox"/> Flush threaded PVC schedule 80 <input type="checkbox"/> 24<br><input type="checkbox"/> Other <input type="checkbox"/>   |
| E. Bentonite seal, top _____ ft. MSL or <u>0.5</u> ft.  | 10. Screen material: <u>pvc</u><br>a. Screen type: <input checked="" type="checkbox"/> Factory cut <input type="checkbox"/> 11<br><input type="checkbox"/> Continuous slot <input type="checkbox"/> 01<br><input type="checkbox"/> Other <input type="checkbox"/>  |
| F. Fine sand, top _____ ft. MSL or <u>18.0</u> ft.  | b. Manufacturer <u>Johnson</u><br>c. Slot size: <u>0.010</u> in.<br>d. Slotted length: <u>10</u> ft.   |
| G. Filter pack, top _____ ft. MSL or <u>18.5</u> ft.  | 11. Backfill material (below filter pack): <input checked="" type="checkbox"/> None <input type="checkbox"/> 14<br><input type="checkbox"/> Other <input type="checkbox"/>   |
| H. Screen joint, top _____ ft. MSL or <u>19.5</u> ft.   |  |
| I. Well bottom _____ ft. MSL or <u>29.5</u> ft.   |  |
| J. Filter pack, bottom _____ ft. MSL or <u>30</u> ft.   |  |
| K. Borehole, bottom _____ ft. MSL or <u>30</u> ft.  |  |
| L. Borehole, diameter <u>6.0</u> in.  |  |
| M. O.D. well casing <u>2.86</u> in.   |  |
| N. I.D. well casing <u>2.06</u> in.   |  |

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

Signature Paul A Lenaker Firm Terracon

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

**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**

|   |  |  |
|---|--|--|
| County<br><b>Outagamie</b>                                    | WI Unique Well # of Removed Well   | Hicap #  |
| Latitude / Longitude (see Instructions)<br>_____ N<br>_____ W | Format Code<br><input type="checkbox"/> DD<br><input type="checkbox"/> DDM | Method Code<br><input type="checkbox"/> GPS008<br><input type="checkbox"/> SCR002<br><input type="checkbox"/> OTH001 |
| 1/4 1/4 SW 1/4 NE<br>or Gov't Lot #                           | Section<br><b>33</b>   | Township<br><b>22 N</b>  |
|   |  | Range<br><b>15</b> <input checked="" type="checkbox"/> E <input type="checkbox"/> W                                  |

Well Street Address  
**W9899 Givens Road**

Well City, Village or Town  
**Hortonville**

Well ZIP Code  
**54944**

Subdivision Name  
\_\_\_\_\_

Lot #  
\_\_\_\_\_

Reason for Removal from Service  
**Closure**

WI Unique Well # of Replacement Well  
\_\_\_\_\_

**3. Filled & Sealed Well / Drillhole / Borehole Information**

Monitoring Well  
 Water Well **MW-2**  
 Borehole / Drillhole

Original Construction Date (mm/dd/yyyy)  
**9/15/2015**

If a Well Construction Report is available, please attach.

Construction Type:  
 Drilled       Driven (Sandpoint)       Dug  
 Other (specify): **Air Hammer**

Formation Type:  
 Unconsolidated Formation       Bedrock

|   |                                   |
|---|-----------------------------------|
| Total Well Depth From Ground Surface (ft.)<br><b>18</b> | Casing Diameter (In.)<br><b>1</b> |
| Lower Drillhole Diameter (in.)<br><b>3.5</b>            | Casing Depth (ft.)<br><b>18</b>   |

Was well annular space grouted?       Yes       No       Unknown

If yes, to what depth (feet)?      Depth to Water (feet)  
**15.67**

**5. Material Used to Fill Well / Drillhole**

**3/8-inch bentonite chips**

**2. Facility / Owner Information**

Facility Name  
**Ahlgrimm Explosives Co Inc - Pill Area**

Facility ID (FID or PWS)  
\_\_\_\_\_

License/Permit/Monitoring #  
\_\_\_\_\_

Original Well Owner  
\_\_\_\_\_

Present Well Owner  
**John Ahlgrimm**

Mailing Address of Present Owner  
**1829 Ravenswood Court**

City of Present Owner  
**Appleton**

State  
**WI**

ZIP Code  
**54913**

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

Pump and piping removed?       Yes       No       N/A

Liner(s) removed?       Yes       No       N/A

Liner(s) perforated?       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

Required Method of Placing Sealing Material  
 Conductor Pipe-Gravity       Conductor Pipe-Pumped  
 Screened & Poured (Bentonite Chips)       Other (Explain): \_\_\_\_\_

Sealing Materials  
 Neat Cement Grout       Concrete  
 Sand-Cement (Concrete) Grout       Bentonite Chips

For Monitoring Wells and Monitoring Well Boreholes Only:  
 Bentonite Chips       Bentonite - Cement Grout  
 Granular Bentonite       Bentonite - Sand Slurry

| From (ft.) | To (ft.)  | No. Yards, Sacks Sealant or Volume (circle one) | Mix Ratio or Mud Weight |
|------------|-----------|---|-------------------------|
| Surface    | <b>18</b> | <b>~ 1/2 bag</b>                                |                         |

**6. Comments**

**Overdrill 1" casing using 3.5" hammer bit to 8 feet bps**

**7. Supervision of Work**

|   |   |   |   |                              |
|---|---|---|---|------------------------------|
| Name of Person or Firm Doing Filling & Sealing<br><b>Paul Lenaker</b> | License #                                 | Date of Filling & Sealing or Verification (mm/dd/yyyy)<br><b>3/6/18</b> | <b>DNR Use Only</b>                         |                              |
| Street or Route<br><b>9856 S. 57th Street</b>                         | Telephone Number<br><b>(414) 423-0255</b> | Comments  | Date Received                               | Noted By                     |
| City<br><b>Franklin</b>   | State<br><b>WI</b>                        | ZIP Code<br><b>53132</b>  | Signature of Person Doing Work<br><b>PL</b> | Date Signed<br><b>3/6/18</b> |

|  |   |  |
|--|---|--|
| Facility/Project Name<br><u>Ahlgrimm Explosives</u>  | Local Grid Location of Well<br>_____ ft. <input type="checkbox"/> N. _____ ft. <input type="checkbox"/> E.<br>_____ ft. <input type="checkbox"/> S. _____ ft. <input type="checkbox"/> W. | Well Name<br>MW2   |
| Facility License, Permit or Monitoring No.   | Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Well Location <input type="checkbox"/><br>Lat. _____ " Long. _____ " or _____ " or _____ "           | Wis. Unique Well No. _____ DNR Well ID No. _____   |
| Facility ID _____  | St. Plane _____ ft. N. _____ ft. E. S/C/N _____   | Date Well Installed<br><u>09 15 / 2015</u><br>m m d d y y v v v  |
| Type of Well<br>Well Code _____ / _____  | Section Location of Waste/Source<br>1/4 of _____ 1/4 of Sec. _____ T. _____ N, R. _____ <input type="checkbox"/> E<br><input type="checkbox"/> W  | Well Installed By: Name (first, last) and Firm<br><u>Brett@Jeff-Ahlgrimm</u><br><u>Paul Lenakar-Terracon</u> |
| Distance from Waste/<br>Source _____ ft.   | Enf. Stds. Apply <input type="checkbox"/>   | Gov. Lot Number _____  |
| Location of Well Relative to Waste/Source<br>u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient<br>d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known |   |  |

|   |   |
|---|---|
| A. Protective pipe, top elevation _____ ft. MSL   | 1. Cap and lock? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |
| B. Well casing, top elevation _____ ft. MSL   | 2. Protective cover pipe:<br>a. Inside diameter: _____ in.<br>b. Length: _____ ft.<br>c. Material: Steel <input type="checkbox"/> 04<br>Other <input type="checkbox"/>  |
| C. Land surface elevation _____ ft. MSL   | d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, describe: _____  |
| D. Surface seal, bottom _____ ft. MSL or _____ ft.  | 3. Surface seal: Bentonite <input checked="" type="checkbox"/> 30<br>Concrete <input type="checkbox"/> 01<br>Other <input type="checkbox"/>   |
| 12. USCS classification of soil near screen:<br>GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> OW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/><br>SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/><br>Bedrock <input checked="" type="checkbox"/> | 4. Material between well casing and protective pipe:<br>Bentonite <input type="checkbox"/> 30<br>Other <input type="checkbox"/>   |
| 13. Sieve analysis performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   | 5. Annular space seal:<br>a. Granular/Chipped Bentonite <input type="checkbox"/> 33<br>b. _____ Lbs/gal mud weight ... Bentonite-sand slurry <input type="checkbox"/> 35<br>c. _____ Lbs/gal mud weight ... Bentonite slurry <input type="checkbox"/> 31<br>d. _____ % Bentonite ... Bentonite-cement grout <input type="checkbox"/> 50<br>e. _____ Ft <sup>3</sup> volume added for any of the above<br>f. How installed: Tremie <input type="checkbox"/> 01<br>Tremie pumped <input type="checkbox"/> 02<br>Gravity <input type="checkbox"/> 08 |
| 14. Drilling method used: Rotary <input type="checkbox"/> 50<br>Hollow Stem Auger <input type="checkbox"/> 41<br><u>Air hammer</u> Other <input checked="" type="checkbox"/>  | 6. Bentonite seal:<br>a. Bentonite granules <input type="checkbox"/> 33<br>b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 32<br>c. _____ Other <input type="checkbox"/>   |
| 15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input checked="" type="checkbox"/> 01<br>Drilling Mud <input type="checkbox"/> 03 None <input type="checkbox"/> 99  | 7. Fine sand material: Manufacturer, product name & mesh size<br>a. _____<br>b. Volume added _____ ft <sup>3</sup>  |
| 16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Describe _____  | 8. Filter pack material: Manufacturer, product name & mesh size<br>a. <u>#40 Red Flint</u><br>b. Volume added <u>2.25 bags ft<sup>3</sup></u>   |
| 17. Source of water (attach analysis, if required): _____   | 9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23<br>Flush threaded PVC schedule 80 <input type="checkbox"/> 24<br>Other <input type="checkbox"/>   |
| E. Bentonite seal, top _____ ft. MSL or <u>0</u> ft.  | 10. Screen material: <u>pvc</u><br>a. Screen type: Factory cut <input checked="" type="checkbox"/> 11<br>Continuous slot <input type="checkbox"/> 01<br>Other <input type="checkbox"/>  |
| F. Fine sand, top _____ ft. MSL or <u>n/a</u> ft.   | b. Manufacturer <u>Johnson</u><br>c. Slot size: <u>0.010 in.</u><br>d. Slotted length: <u>10 ft.</u>  |
| G. Filter pack, top _____ ft. MSL or <u>7.0</u> ft.   | 11. Backfill material (below filter pack): None <input type="checkbox"/> 14<br><u>#40 Red Flint</u> Other <input checked="" type="checkbox"/>   |
| H. Screen joint, top _____ ft. MSL or <u>8.0</u> ft.  |   |
| I. Well bottom _____ ft. MSL or <u>18.0</u> ft.   |   |
| J. Filter pack, bottom _____ ft. MSL or <u>19.0</u> ft.   |   |
| K. Borehole, bottom _____ ft. MSL or <u>19.0</u> ft.  |   |
| L. Borehole, diameter <u>3.5</u> in.  |   |
| M. O.D. well casing <u>1.32</u> in.   |   |
| N. I.D. well casing <u>1.03</u> in.   |   |

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

Signature Paul A Lenaker Firm Terracon

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

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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**

County: Outagamie      WI Unique Well # of Removed Well: \_\_\_\_\_      Hicap #: \_\_\_\_\_

Latitude / Longitude (see instructions): \_\_\_\_\_ N      Format Code:  DD      Method Code:  GPS008  
 \_\_\_\_\_ W       DDM       SCR002  
 OTH001

1/4 1/4 SW 1/4 WE      Section: 33      Township: 22 N      Range: 15  E  W

Well Street Address: W9899 Givens Road

Well City, Village or Town: Hortonville      Well ZIP Code: 54944

Subdivision Name: \_\_\_\_\_      Lot #: \_\_\_\_\_

Reason for Removal from Service: Closure      WI Unique Well # of Replacement Well: \_\_\_\_\_

**3. Filled & Sealed Well / Drillhole / Borehole Information**

Monitoring Well      Original Construction Date (mm/dd/yyyy): 9/15/2015  
 Water Well MW-3  
 Borehole / Drillhole      If a Well Construction Report is available, please attach.

Construction Type:  
 Drilled       Driven (Sandpoint)       Dug  
 Other (specify): Air Hammer

Formation Type:  
 Unconsolidated Formation       Bedrock

Total Well Depth From Ground Surface (ft.): 15.5      Casing Diameter (in.): 1

Lower Drillhole Diameter (in.): 3.5      Casing Depth (ft.): 15.5

Was well annular space grouted?       Yes       No       Unknown

If yes, to what depth (feet)?      Depth to Water (feet): dry

**5. Material Used to Fill Well / Drillhole**

3/8-inch bentonite chips

**2. Facility / Owner Information**

Facility Name: Ahlgrimm Explosives Co Inc - Pill Area  
 Facility ID (FID or PWS): \_\_\_\_\_

License/Permit/Monitoring #: \_\_\_\_\_

Original Well Owner: \_\_\_\_\_

Present Well Owner: John Ahlgrimm

Mailing Address of Present Owner: 1829 Ravenswood Court

City of Present Owner: Appleton      State: WI      ZIP Code: 54913

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

- Pump and piping removed?       Yes       No       N/A  
 Liner(s) removed?       Yes       No       N/A  
 Liner(s) perforated?       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

Required Method of Placing Sealing Material:  
 Conductor Pipe-Gravity       Conductor Pipe-Pumped  
 Screened & Poured (Bentonite Chips)       Other (Explain): \_\_\_\_\_

Sealing Materials:  
 Neat Cement Grout       Concrete  
 Sand-Cement (Concrete) Grout       Bentonite Chips

For Monitoring Wells and Monitoring Well Boreholes Only:  
 Bentonite Chips       Bentonite - Cement Grout  
 Granular Bentonite       Bentonite - Sand Slurry

**6. Comments**

Upper 2' of casing removed from ground

**7. Supervision of Work**

|  |  |  |   |  |   |  |                            |  |
|--|--|--|---|--|---|--|----------------------------|--|
| Name of Person or Firm Doing Filling & Sealing: <u>Paul Knaker</u> |  |  | License #: _____                        |  | Date of Filling & Sealing or Verification (mm/dd/yyyy): <u>3/6/18</u> |  | DNR Use Only               |  |
| Street or Route: <u>9856 S. 57th Street</u>                        |  |  | Telephone Number: <u>(414) 423-0255</u> |  | Date Received: _____  |  | Noted By: _____            |  |
| City: <u>Franklin</u>  |  |  | State: <u>WI</u> ZIP Code: <u>53132</u> |  | Signature of Person Doing Work: <u>[Signature]</u>                    |  | Date Signed: <u>3/6/18</u> |  |

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

|   |  |   |  |  |  |
|---|--|---|--|--|--|
| Facility/Project Name<br><u>Ahlgrimm Explosives</u> |  | Local Grid Location of Well<br>ft. <input type="checkbox"/> N. <input type="checkbox"/> S. <input type="checkbox"/> E. <input type="checkbox"/> W.  |  | Well Name<br><u>MW3</u>  |  |
| Facility License, Permit or Monitoring No.          |  | Local Grid Origin (estimated: <input type="checkbox"/> ) or Well Location <input type="checkbox"/>  |  | Wis. Unique Well No. <input type="checkbox"/> DNR Well ID No. <input type="checkbox"/> |  |
| Facility ID   |  | St. Plane _____ ft. N. _____ ft. E. S/C/N   |  | Date Well Installed<br><u>09.15.2015</u><br>m m d d y y y y                            |  |
| Type of Well  |  | Section Location of Waste/Source<br>1/4 of _____ 1/4 of Sec. _____ T. _____ N. R. _____ <input type="checkbox"/> E <input type="checkbox"/> W   |  | Well Installed By: Name (first, last) and Firm<br><u>Brett@Jeff-Ahlgrimm</u>           |  |
| Well Code _____ / _____                             |  | Location of Well Relative to Waste/Source<br>u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidgradient<br>d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known |  | Gov. Lot Number _____  |  |
| Distance from Waste/Source _____ ft.                |  | Enl. Stds. Apply <input type="checkbox"/>   |  | Well Installed By: Name (first, last) and Firm<br><u>Paul Lenakar-Terracon</u>         |  |

|   |  |
|---|--|
| A. Protective pipe, top elevation _____ ft. MSL   | 1. Cap and lock? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |
| B. Well casing, top elevation _____ ft. MSL   | 2. Protective cover pipe:<br>a. Inside diameter: _____ in.<br>b. Length: _____ ft.<br>c. Material: Steel <input type="checkbox"/> 04<br>Other <input type="checkbox"/>   |
| C. Land surface elevation _____ ft. MSL   | d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, describe: _____   |
| D. Surface seal, bottom _____ ft. MSL or _____ ft.  | 3. Surface seal: Bentonite <input checked="" type="checkbox"/> 30<br>Concrete <input type="checkbox"/> 01<br>Other <input type="checkbox"/>  |
| 12. USCS classification of soil near screen:<br>GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/><br>SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/><br>Bedrock <input checked="" type="checkbox"/> |  |
| 13. Sieve analysis performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  |
| 14. Drilling method used: Rotary <input type="checkbox"/> 50<br>Hollow Stem Auger <input type="checkbox"/> 41<br><u>Air hammer</u> Other <input checked="" type="checkbox"/>  |  |
| 15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input checked="" type="checkbox"/> 01<br>Drilling Mud <input type="checkbox"/> 03 None <input type="checkbox"/> 99  |  |
| 16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Describe _____  |  |
| 17. Source of water (attach analysis, if required):<br>_____  |  |
| E. Bentonite seal, top _____ ft. MSL or <u>0</u> ft.  | 4. Material between well casing and protective pipe: Bentonite <input type="checkbox"/> 30<br>Other <input type="checkbox"/>   |
| F. Fine sand, top _____ ft. MSL or <u>n/a</u> ft.   | 5. Annular space seal: a. Granular/Chipped Bentonite <input type="checkbox"/> 33<br>b. _____ Lbs/gal mud weight ... Bentonite-sand slurry <input type="checkbox"/> 35<br>c. _____ Lbs/gal mud weight ... Bentonite slurry <input type="checkbox"/> 31<br>d. _____ % Bentonite ... Bentonite-cement grout <input type="checkbox"/> 50<br>e. _____ Ft <sup>3</sup> volume added for any of the above<br>f. How installed: Tremie <input type="checkbox"/> 01<br>Tremie pumped <input type="checkbox"/> 02<br>Gravity <input type="checkbox"/> 08 |
| G. Filter pack, top _____ ft. MSL or <u>4.5</u> ft.   | 6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33<br>b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 32<br>c. _____ Other <input type="checkbox"/>   |
| H. Screen joint, top _____ ft. MSL or <u>5.5</u> ft.  | 7. Fine sand material: Manufacturer, product name & mesh size<br>a. <u>N/A</u><br>b. Volume added _____ ft <sup>3</sup>  |
| I. Well bottom _____ ft. MSL or <u>15.5</u> ft.   | 8. Filter pack material: Manufacturer, product name & mesh size<br>a. <u>#40 Red Flint</u><br>b. Volume added <u>2 bags</u> ft <sup>3</sup>  |
| J. Filter pack, bottom _____ ft. MSL or <u>20.0</u> ft.   | 9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23<br>Flush threaded PVC schedule 80 <input type="checkbox"/> 24<br>Other <input type="checkbox"/>  |
| K. Borehole, bottom _____ ft. MSL or <u>20.0</u> ft.  | 10. Screen material: <u>pvc</u><br>a. Screen type: Factory cut <input checked="" type="checkbox"/> 11<br>Continuous slot <input type="checkbox"/> 01<br>Other <input type="checkbox"/>   |
| L. Borehole, diameter <u>3.5</u> in.  | b. Manufacturer <u>Johnson</u><br>c. Slot size: <u>0.010</u> in.<br>d. Slotted length: <u>10</u> ft.   |
| M. O.D. well casing <u>1.32</u> in.   | 11. Backfill material (below filter pack): None <input type="checkbox"/> 14<br><u>#40 Red Flint</u> Other <input checked="" type="checkbox"/>  |
| N. I.D. well casing <u>1.03</u> in.   |  |

I hereby certify that the information on this form is true and correct to the best of my knowledge.  
Signature Paul A Lenaker Firm Terracon

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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**

County: Outagamie      WI Unique Well # of Removed Well: \_\_\_\_\_      Hicap #: \_\_\_\_\_

Latitude / Longitude (see instructions): \_\_\_\_\_ N      Format Code:  DD      Method Code:  GPS008  
 \_\_\_\_\_ W       DDM       SCR002  
 OTH001

1/4 SW      1/4 NE      Section: 33      Township: 22 N      Range: 15  E  W

Well Street Address: W9899 Givens Road

Well City, Village or Town: Hortonville      Well ZIP Code: 54944

Subdivision Name: \_\_\_\_\_      Lot #: \_\_\_\_\_

Reason for Removal from Service: Closure      WI Unique Well # of Replacement Well: \_\_\_\_\_

**2. Facility / Owner Information**

Facility Name: Ahlgrimm Explosives Co Inc - Drill Area

Facility ID (FID or PWS): \_\_\_\_\_

License/Permit/Monitoring #: \_\_\_\_\_

Original Well Owner: \_\_\_\_\_

Present Well Owner: John Ahlgrimm

Mailing Address of Present Owner: 1829 Ravenswood Court

City of Present Owner: Appleton      State: WI      ZIP Code: 54913

**3. Filled & Sealed Well / Drillhole / Borehole Information**

Monitoring Well      Original Construction Date (mm/dd/yyyy): 9/15/2015

Water Well      MW-4

Borehole / Drillhole

If a Well Construction Report is available, please attach: \_\_\_\_\_

Construction Type:  
 Drilled       Driven (Sandpoint)       Dug  
 Other (specify): Air Hammer

Formation Type:  
 Unconsolidated Formation       Bedrock

Total Well Depth From Ground Surface (ft.): 15.5      Casing Diameter (in.): 1

Lower Drillhole Diameter (in.): 3.5      Casing Depth (ft.): 15.5

Was well annular space grouted?       Yes       No       Unknown

If yes, to what depth (feet)?      Depth to Water (feet): 15.77

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

Pump and piping removed?       Yes       No       N/A

Liner(s) removed?       Yes       No       N/A

Liner(s) perforated?       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

Required Method of Placing Sealing Material:  
 Conductor Pipe-Gravity       Conductor Pipe-Pumped  
 Screened & Poured (Bentonite Chips)       Other (Explain): \_\_\_\_\_

Sealing Materials:  
 Neat Cement Grout       Concrete  
 Sand-Cement (Concrete) Grout       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.) | No. Yards, Sacks Sealant or Volume (circle one) | Mix Ratio or Mud Weight |
|------------|----------|---|-------------------------|
| Surface    | 15.5     | ~1/2 bag  |                         |

**6. Comments**

Upper 3 feet of casing removed from ground.

**7. Supervision of Work**

|  |   |   |                            |  |
|--|---|---|----------------------------|--|
| Name of Person or Firm Doing Filling & Sealing: <u>Paul Knaker</u> | License #: _____                        | Date of Filling & Sealing or Verification (mm/dd/yyyy): <u>3/6/18</u> | <b>DNR Use Only</b>        |  |
| Street or Route: <u>9856 S. 57th Street</u>                        | Telephone Number: <u>(414) 423-0255</u> | Date Received: _____  | Noted By: _____            |  |
| City: <u>Franklin</u>  | State: <u>WI</u>                        | ZIP Code: <u>53132</u>  | Comments: _____            |  |
| Signature of Person Doing Work: <u>[Signature]</u>                 |   |   | Date Signed: <u>3/6/18</u> |  |



|  |  |  |
|--|--|--|
| Facility/Project Name<br><u>Ahlgrimm Explosives</u>  | Local Grid Location of Well<br>ft. <input type="checkbox"/> N. <input type="checkbox"/> E. <input type="checkbox"/> S. <input type="checkbox"/> W.   | Well Name<br>MW4   |
| Facility License, Permit or Monitoring No.   | Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Well Location <input type="checkbox"/><br>Lat. " Long. " or " " | Wis. Unique Well No. DNR Well ID No.   |
| Facility ID  | St. Plane _____ ft. N. _____ ft. E. S/C/N  | Date Well Installed<br><u>09 15 / 2015</u><br>m m d d y y y y  |
| Type of Well<br>Well Code <u>/</u>   | Section Location of Waste/Source<br>1/4 of _____ 1/4 of Sec. _____ T. _____ N, R. <input type="checkbox"/> E <input type="checkbox"/> W              | Well Installed By: Name (first, last) and Firm<br><u>Brett@Jeff-Ahlgrimm</u><br><u>Paul Lenakar-Terracon</u> |
| Distance from Waste/Source _____ ft.   | Enf. Stds. Apply <input type="checkbox"/>  | Gov. Lot Number _____  |
| Location of Well Relative to Waste/Source<br>u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient<br>d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known |  |  |

|   |   |
|---|---|
| A. Protective pipe, top elevation _____ ft. MSL   | 1. Cap and lock? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |
| B. Well casing, top elevation _____ ft. MSL   | 2. Protective cover pipe:<br>a. Inside diameter: _____ in.<br>b. Length: _____ ft.<br>c. Material: Steel <input type="checkbox"/> 0 4<br>Other <input type="checkbox"/>   |
| C. Land surface elevation _____ ft. MSL   | d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, describe: _____  |
| D. Surface seal, bottom _____ ft. MSL or _____ ft.  | 3. Surface seal: Bentonite <input checked="" type="checkbox"/> 3 0<br>Concrete <input type="checkbox"/> 0 1<br>Other <input type="checkbox"/>   |
| 12. USCS classification of soil near screen:<br>GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/><br>SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/><br>Bedrock <input checked="" type="checkbox"/> |   |
| 13. Sieve analysis performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |   |
| 14. Drilling method used: Rotary <input type="checkbox"/> 5 0<br>Hollow Stem Auger <input type="checkbox"/> 4 1<br><u>Air hammer</u> Other <input checked="" type="checkbox"/>  |   |
| 15. Drilling fluid used: Water <input type="checkbox"/> 0 2 Air <input checked="" type="checkbox"/> 0 1<br>Drilling Mud <input type="checkbox"/> 0 3 None <input type="checkbox"/> 9 9  |   |
| 16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Describe _____  |   |
| 17. Source of water (attach analysis, if required):<br><u>n/a</u>   |   |
| E. Bentonite seal, top _____ ft. MSL or <u>0</u> ft.  | 4. Material between well casing and protective pipe:<br>Bentonite <input type="checkbox"/> 3 0<br>Other <input type="checkbox"/>  |
| F. Fine sand, top _____ ft. MSL or <u>n/a</u> ft.   | 5. Annular space seal: a. Granular/Chipped Bentonite <input type="checkbox"/> 3 3<br>b. _____ Lbs/gal mud weight . . . Bentonite-sand slurry <input type="checkbox"/> 3 5<br>c. _____ Lbs/gal mud weight . . . . Bentonite slurry <input type="checkbox"/> 3 1<br>d. _____ % Bentonite . . . . . Bentonite-cement grout <input type="checkbox"/> 5 0<br>e. _____ Ft <sup>3</sup> volume added for any of the above<br>f. How installed: Tremie <input type="checkbox"/> 0 1<br>Tremie pumped <input type="checkbox"/> 0 2<br>Gravity <input type="checkbox"/> 0 8 |
| G. Filter pack, top _____ ft. MSL or <u>4.5</u> ft.   | 6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 3 3<br>b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 3 2<br>c. _____ Other <input type="checkbox"/>  |
| H. Screen joint, top _____ ft. MSL or <u>5.5</u> ft.  | 7. Fine sand material: Manufacturer, product name & mesh size<br>a. <u>N/A</u><br>b. Volume added _____ ft <sup>3</sup>   |
| I. Well bottom _____ ft. MSL or <u>15.5</u> ft.   | 8. Filter pack material: Manufacturer, product name & mesh size<br>a. <u>#40 Red Flint</u><br>b. Volume added <u>3.25 bags ft<sup>3</sup></u>   |
| J. Filter pack, bottom _____ ft. MSL or <u>20.0</u> ft.   | 9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 2 3<br>Flush threaded PVC schedule 80 <input type="checkbox"/> 2 4<br>Other <input type="checkbox"/>   |
| K. Borehole, bottom _____ ft. MSL or <u>20.0</u> ft.  | 10. Screen material: <u>pvc</u><br>a. Screen type: Factory cut <input checked="" type="checkbox"/> 1 1<br>Continuous slot <input type="checkbox"/> 0 1<br>Other <input type="checkbox"/>  |
| L. Borehole, diameter <u>3.5</u> in.  | b. Manufacturer <u>Johnson</u><br>c. Slot size: <u>0.010</u> in.<br>d. Slotted length: <u>10</u> ft.  |
| M. O.D. well casing <u>1.32</u> in.   | 11. Backfill material (below filter pack): None <input type="checkbox"/> 1 4<br><u>#40 Red Flint</u> Other <input checked="" type="checkbox"/>  |
| N. I.D. well casing <u>1.03</u> in.   |   |

I hereby certify that the information on this form is true and correct to the best of my knowledge.  
Signature Paul A Lenaker Firm Terracon

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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<br><b>Outagamie</b>                                    |  | WI Unique Well # of Removed Well   |  | Hicap #  |  | Facility Name<br><b>Ahlgrimm Explosives Co Inc - Prill Area</b> |  |  |  |
| Latitude / Longitude (see instructions)<br>_____ N<br>_____ W |  | Format Code<br><input type="checkbox"/> DD<br><input type="checkbox"/> DDM |  | Method Code<br><input type="checkbox"/> GPS008<br><input type="checkbox"/> SCR002<br><input type="checkbox"/> OTH001 |  | Facility ID (FID or PWS)  |  |  |  |
| 1/4 1/4 <b>SW</b> 1/4 <b>NE</b><br>or Gov't Lot #             |  | Section<br><b>33</b>   |  | Township<br><b>22 N</b>  |  | Range<br><b>15</b>  |  | Original Well Owner                      |  |
| Well Street Address<br><b>W9899 Givens Road</b>               |  | Well ZIP Code<br><b>54944</b>  |  | Present Well Owner<br><b>John Ahlgrimm</b>   |  |   |  |  |  |
| Subdivision Name  |  | Lot #  |  | Mailing Address of Present Owner<br><b>1829 Ravenswood Court</b>   |  |   |  | City of Present Owner<br><b>Appleton</b> |  |
|   |  |  |  | State<br><b>WI</b>   |  | ZIP Code<br><b>54913</b>  |  |  |  |

Reason for Removal from Service  
**Closure**

WI Unique Well # of Replacement Well

**3. Filled & Sealed Well / Drillhole / Borehole Information**

Monitoring Well  
 Water Well **MW-5**  
 Borehole / Drillhole

Original Construction Date (mm/dd/yyyy)  
**9/16/2015**

If a Well Construction Report is available, please attach.

Construction Type:

Drilled       Driven (Sandpoint)       Dug  
 Other (specify): **Air Hammer**

Formation Type:

Unconsolidated Formation       Bedrock

Total Well Depth From Ground Surface (ft.) **16**

Casing Diameter (in.) **1**

Lower Drillhole Diameter (in.) **3.5**

Casing Depth (ft.) **16**

Was well annular space grouted?       Yes       No       Unknown

If yes, to what depth (feet)?

Depth to Water (feet)

**5. Material Used to Fill Well / Drillhole**

**3/8-inch bentonite chips**

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

Pump and piping removed?       Yes       No       N/A  
 Liner(s) removed?       Yes       No       N/A  
 Liner(s) perforated?       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

Required Method of Placing Sealing Material

Conductor Pipe-Gravity       Conductor Pipe-Pumped  
 Screened & Poured (Bentonite Chips)       Other (Explain): \_\_\_\_\_

Sealing Materials

Neat Cement Grout       Concrete  
 Sand-Cement (Concrete) Grout       Bentonite Chips

For Monitoring Wells and Monitoring Well Boreholes Only:

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

| From (ft.) | To (ft.) | No. Yards, Sacks Sealant or Volume (circle one) | Mix Ratio or Mud Weight |
|------------|----------|---|-------------------------|
| Surface    | 16       | 1 bag   |                         |

**6. Comments**

**overdrill 1" casing using 3.5" hammer bit to 8 feet bgs.**

**7. Supervision of Work**

|   |                    |   |  |                     |                               |
|---|--------------------|---|--|---------------------|-------------------------------|
| Name of Person or Firm Doing Filling & Sealing<br><b>Paul Lenaker</b> |                    | License #                                 | Date of Filling & Sealing or Verification (mm/dd/yyyy)<br><b>3/16/18</b> | <b>DNR Use Only</b> |                               |
| Street or Route<br><b>9856 S. 57th Street</b>                         |                    | Telephone Number<br><b>(414) 423-0255</b> | Date Received  | Noted By            |                               |
| City<br><b>Franklin</b>   | State<br><b>WI</b> | ZIP Code<br><b>53132</b>                  | Signature of Person Doing Work<br><b>DL</b>                              |                     | Date Signed<br><b>3/16/18</b> |

|   |  |  |  |  |  |
|---|--|--|--|--|--|
| Facility/Project Name<br><u>Ahlgrimm Explosives</u> |  | Local Grid Location of Well<br>_____ ft. <input type="checkbox"/> N. _____ ft. <input type="checkbox"/> E.<br>_____ ft. <input type="checkbox"/> S. _____ ft. <input type="checkbox"/> W.                  |  | Well Name<br>MW5   |  |
| Facility License, Permit or Monitoring No.          |  | Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Well Location <input type="checkbox"/>  |  | Wis. Unique Well No. _____ DNR Well ID No. _____   |  |
| Facility ID   |  | Lat. _____ " Long. _____ " or _____  |  | Date Well Installed<br><u>09 16 / 2015</u><br>m m d d y y v v y  |  |
| Type of Well  |  | St. Plane _____ ft. N. _____ ft. E. S/C/N  |  | Well Installed By: Name (first, last) and Firm<br><u>Brett@Jeff-Ahlgrimm</u><br><u>Paul Lenakar-Terracon</u> |  |
| Well Code <u>/</u>                                  |  | Section Location of Waste/Source<br>1/4 of _____ 1/4 of Sec. _____ T. _____ N, R. _____ <input type="checkbox"/> E<br><input type="checkbox"/> W   |  | Gov. Lot Number _____  |  |
| Distance from Waste/Source _____ ft.                |  | Location of Well Relative to Waste/Source<br>u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient<br>d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known |  |  |  |
| Enf. Stds. Apply <input type="checkbox"/>           |  |  |  |  |  |

|   |  |
|---|--|
| A. Protective pipe, top elevation _____ ft. MSL   | 1. Cap and lock? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |
| B. Wall casing, top elevation _____ ft. MSL   | 2. Protective cover pipe:<br>a. Inside diameter: _____ in.   |
| C. Land surface elevation _____ ft. MSL   | b. Length: _____ ft.   |
| D. Surface seal, bottom _____ ft. MSL or _____ ft.  | c. Material: Steel <input type="checkbox"/> 04<br>Other <input type="checkbox"/>   |
| 12. USCS classification of soil near screen:<br>GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/><br>SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/><br>Bedrock <input checked="" type="checkbox"/> | d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, describe: _____   |
| 13. Sieve analysis performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   | 3. Surface seal: Bentonite <input checked="" type="checkbox"/> 30<br>Concrete <input type="checkbox"/> 01<br>Other <input type="checkbox"/>  |
| 14. Drilling method used: Rotary <input type="checkbox"/> 50<br>Hollow Stem Auger <input type="checkbox"/> 41<br><u>Air hammer</u> Other <input checked="" type="checkbox"/>  | 4. Material between well casing and protective pipe:<br>Bentonite <input type="checkbox"/> 30<br>Other <input type="checkbox"/>  |
| 15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input checked="" type="checkbox"/> 01<br>Drilling Mud <input type="checkbox"/> 03 None <input type="checkbox"/> 99  | 5. Annular space seal: a. Granular/Chipped Bentonite <input type="checkbox"/> 33<br>b. _____ Lbs/gal mud weight . . . Bentonite-sand slurry <input type="checkbox"/> 35<br>c. _____ Lbs/gal mud weight . . . Bentonite slurry <input type="checkbox"/> 31<br>d. _____ % Bentonite . . . . Bentonite-cement grout <input type="checkbox"/> 50<br>e. _____ Ft <sup>3</sup> volume added for any of the above<br>f. How installed: Tremie <input type="checkbox"/> 01<br>Tramic pumped <input type="checkbox"/> 02<br>Gravity <input type="checkbox"/> 08 |
| 16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Describe _____  | 6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33<br>b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 32<br>c. _____ Other <input type="checkbox"/>   |
| 17. Source of water (attach analysis, if required):<br><u>n/a</u>   | 7. Fine sand material: Manufacturer, product name & mesh size<br>a. <u>N/A</u><br>b. Volume added _____ ft <sup>3</sup>  |
| E. Bentonite seal, top _____ ft. MSL or <u>0</u> ft.  | 8. Filter pack material: Manufacturer, product name & mesh size<br>a. <u>#40 Red Flint</u><br>b. Volume added <u>2 bags</u> ft <sup>3</sup>  |
| F. Fine sand, top _____ ft. MSL or <u>n/a</u> ft.   | 9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23<br>Flush threaded PVC schedule 80 <input type="checkbox"/> 24<br>Other <input type="checkbox"/>  |
| G. Filter pack, top _____ ft. MSL or <u>5.0</u> ft.   | 10. Screen material: <u>pvc</u><br>a. Screen type: Factory cut <input checked="" type="checkbox"/> 11<br>Continuous slot <input type="checkbox"/> 01<br>Other <input type="checkbox"/>   |
| H. Screen joint, top _____ ft. MSL or <u>6.0</u> ft.  | b. Manufacturer <u>Johnson</u><br>c. Slot size: <u>0.010</u> in.<br>d. Slotted length: <u>10</u> ft.   |
| I. Well bottom _____ ft. MSL or <u>16.0</u> ft.   | 11. Backfill material (below filter pack): None <input type="checkbox"/> 14<br><u>#40 Red Flint</u> Other <input checked="" type="checkbox"/>  |
| J. Filter pack, bottom _____ ft. MSL or <u>18.0</u> ft.   |  |
| K. Borehole, bottom _____ ft. MSL or <u>18.0</u> ft.  |  |
| L. Borehole, diameter <u>3.5</u> in.  |  |
| M. O.D. well casing <u>1.32</u> in.   |  |
| N. I.D. well casing <u>1.03</u> in.   |  |

I hereby certify that the information on this form is true and correct to the best of my knowledge.  
Signature Paul A Lenaker Firm Terracon

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

**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<br><b>Outagamie</b>                                    | WI Unique Well # of Removed Well   | Hicap #  | Facility Name<br><b>Ahlgrimm Explosives Co Inc - Prill Area</b> |
| Latitude / Longitude (see instructions)<br>_____ N<br>_____ W | Format Code<br><input type="checkbox"/> DD<br><input type="checkbox"/> DDM | Method Code<br><input type="checkbox"/> GPS008<br><input type="checkbox"/> SCR002<br><input type="checkbox"/> OTH001 | Facility ID (FID or PWS)  |
| 1/4 1/4 <b>SW</b> 1/4 <b>WE</b><br>or Gov't Lot #             | Section<br><b>33</b>   | Township<br><b>22 N</b>  | License/Permit/Monitoring #                                     |
| Well Street Address<br><b>W9899 Givens Road</b>               | Range<br><b>15</b>   | Original Well Owner  |   |
| Well City, Village or Town<br><b>Hortonville</b>              | Well ZIP Code<br><b>54944</b>  | Present Well Owner<br><b>John Ahlgrimm</b>   |   |
| Subdivision Name  | Lot #  | Mailing Address of Present Owner<br><b>1829 Ravenswood Court</b>   |   |
| Reason for Removal from Service<br><b>Closure</b>             | WI Unique Well # of Replacement Well                                       | City of Present Owner<br><b>Appleton</b>   | State<br><b>WI</b>  |
|   |  | ZIP Code<br><b>54913</b>   |   |

**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)<br><b>9/15/2015</b> | Pump and piping removed?<br><input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A  |
| <input type="checkbox"/> Water Well <b>MW-6</b>   | If a Well Construction Report is available, please attach.  | Liner(s) removed?<br><input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A   |
| <input type="checkbox"/> Borehole / Drillhole   |   | Liner(s) perforated?<br><input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A  |
| Construction Type:<br><input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug         |   | Screen removed?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A   |
| <input checked="" type="checkbox"/> Other (specify): <b>Air Hammer</b>  |   | Casing left in place?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A   |
| Formation Type:<br><input type="checkbox"/> Unconsolidated Formation <input checked="" type="checkbox"/> Bedrock                        |   | Was casing cut off below surface?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A   |
| Total Well Depth From Ground Surface (ft.)<br><b>24</b>   | Casing Diameter (in.)<br><b>1</b>                           | Did sealing material rise to surface?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A   |
| Lower Drillhole Diameter (in.)<br><b>3.5</b>  | Casing Depth (ft.)<br><b>24</b>                             | Did material settle after 24 hours?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A   |
| Was well annular space grouted?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown |   | If yes, was hole retopped?<br><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A   |
| If yes, to what depth (feet)?   | Depth to Water (feet)<br><b>22-13</b>                       | If bentonite chips were used, were they hydrated with water from a known safe source?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |

| 5. Material Used to Fill Well / Drillhole | From (ft.) | To (ft.)  | No. Yards, Sacks Sealant or Volume (circle one) | Mix Ratio or Mud Weight |
|---|------------|-----------|---|-------------------------|
| <b>3/8-inch bentonite chips</b>           | Surface    | <b>24</b> | <b>1 bag</b>                                    |                         |

**6. Comments**  
**top 4 feet of 1" PVC removed from ground**

|   |   |   |   |                              |
|---|---|---|---|------------------------------|
| <b>7. Supervision of Work</b>   |   |   | <b>DNR Use Only</b>                         |                              |
| Name of Person or Firm Doing Filling & Sealing<br><b>Paul Lenaker</b> | License #                                 | Date of Filling & Sealing or Verification (mm/dd/yyyy)<br><b>3/6/18</b> | Date Received                               | Noted By                     |
| Street or Route<br><b>9856 S. 57th Street</b>                         | Telephone Number<br><b>(414) 423-0255</b> | Comments  |   |                              |
| City<br><b>Franklin</b>   | State<br><b>WI</b>                        | ZIP Code<br><b>53132</b>  | Signature of Person Doing Work<br><b>DL</b> | Date Signed<br><b>3/6/18</b> |

|  |   |  |
|--|---|--|
| Facility/Project Name<br><u>Ahlgrimm Explosives</u>  | Local Grid Location of Well<br>_____ ft. <input type="checkbox"/> N. _____ ft. <input type="checkbox"/> E.<br>_____ ft. <input type="checkbox"/> S. _____ ft. <input type="checkbox"/> W. | Well Name<br>MW6   |
| Facility License, Permit or Monitoring No.   | Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Well Location <input type="checkbox"/><br>Lat. _____ " Long. _____ " or _____ " or _____ "           | Wis. Unique Well No. _____ DNR Well ID No. _____   |
| Facility ID _____  | St. Plane _____ ft. N. _____ ft. E. S/C/N _____   | Date Well Installed<br><u>09 15 / 2015</u><br>m m d d y y v v v v  |
| Type of Well<br>Well Code _____ / _____  | Section Location of Waste/Source<br>1/4 of _____ 1/4 of Sec. _____ T. _____ N, R. _____ <input type="checkbox"/> E<br><input type="checkbox"/> W  | Well Installed By: Name (first, last) and Firm<br><u>Brett@Jeff-Ahlgrimm</u><br><u>Paul Lenakar-Terracon</u> |
| Distance from Waste/<br>Source _____ ft.   | Enf. Stds. Apply <input type="checkbox"/>   | Gov. Lot Number _____  |
| Location of Well Relative to Waste/Source<br>u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient<br>d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known |   |  |

|  |  |
|--|--|
| A. Protective pipe, top elevation _____ ft. MSL  | 1. Cap and lock? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |
| B. Well casing, top elevation _____ ft. MSL  | 2. Protective cover pipe:<br>a. Inside diameter: _____ in.<br>b. Length: _____ ft.<br>c. Material: Steel <input type="checkbox"/> 04<br>Other <input type="checkbox"/>   |
| C. Land surface elevation _____ ft. MSL  | d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, describe: _____   |
| D. Surface seal, bottom _____ ft. MSL or _____ ft.   | 3. Surface seal: Bentonite <input checked="" type="checkbox"/> 30<br>Concrete <input type="checkbox"/> 01<br>Other <input type="checkbox"/>  |
| <div style="border: 1px solid black; padding: 5px;"> <p>12. USCS classification of soil near screen:<br/>GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/><br/>SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/><br/>Bedrock <input checked="" type="checkbox"/></p> <p>13. Sieve analysis performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>14. Drilling method used: Rotary <input type="checkbox"/> 50<br/>Hollow Stem Auger <input type="checkbox"/> 41<br/><u>Air hammer</u> Other <input checked="" type="checkbox"/></p> <p>15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input checked="" type="checkbox"/> 01<br/>Drilling Mud <input type="checkbox"/> 03 None <input type="checkbox"/> 99</p> <p>16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br/>Describe _____</p> <p>17. Source of water (attach analysis, if required):<br/><u>n/a</u></p> </div> |  |
| E. Bentonite seal, top _____ ft. MSL or <u>0</u> ft.   | 4. Material between well casing and protective pipe:<br>Bentonite <input type="checkbox"/> 30<br>Other <input type="checkbox"/>  |
| F. Fine sand, top _____ ft. MSL or <u>n/a</u> ft.  | 5. Annular space seal: a. Granular/Chipped Bentonite <input type="checkbox"/> 33<br>b. _____ Lbs/gal mud weight ... Bentonite-sand slurry <input type="checkbox"/> 35<br>c. _____ Lbs/gal mud weight ... Bentonite slurry <input type="checkbox"/> 31<br>d. _____ % Bentonite ... Bentonite-cement grout <input type="checkbox"/> 50<br>e. _____ Ft <sup>3</sup> volume added for any of the above<br>f. How installed: Tremie <input type="checkbox"/> 01<br>Tremie pumped <input type="checkbox"/> 02<br>Gravity <input type="checkbox"/> 08 |
| G. Filter pack, top _____ ft. MSL or <u>13.0</u> ft.   | 6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33<br>b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 32<br>c. _____ Other <input type="checkbox"/>   |
| H. Screen joint, top _____ ft. MSL or <u>14.0</u> ft.  | 7. Fine sand material: Manufacturer, product name & mesh size<br>a. <u>N/A</u><br>b. Volume added _____ ft <sup>3</sup>  |
| I. Well bottom _____ ft. MSL or <u>24.0</u> ft.  | 8. Filter pack material: Manufacturer, product name & mesh size<br>a. <u>#40 Red Flint</u><br>b. Volume added <u>2 bags</u> ft <sup>3</sup>  |
| J. Filter pack, bottom _____ ft. MSL or <u>25.0</u> ft.  | 9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23<br>Flush threaded PVC schedule 80 <input type="checkbox"/> 24<br>Other <input type="checkbox"/>  |
| K. Borehole, bottom _____ ft. MSL or <u>25.0</u> ft.   | 10. Screen material: <u>pvc</u><br>a. Screen type: Factory cut <input checked="" type="checkbox"/> 11<br>Continuous slot <input type="checkbox"/> 01<br>Other <input type="checkbox"/>   |
| L. Borehole, diameter <u>3.5</u> in.   | b. Manufacturer <u>Johnson</u><br>c. Slot size: <u>0.010</u> in.<br>d. Slotted length: <u>10</u> ft.   |
| M. O.D. well casing <u>1.32</u> in.  | 11. Backfill material (below filter pack): None <input type="checkbox"/> 14<br><u>#40 Red Flint</u> Other <input checked="" type="checkbox"/>  |
| N. I.D. well casing <u>1.03</u> in.  |  |

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

Signature Paul A Lenaker Firm Terracon

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

# 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**

|   |  |  |
|---|--|--|
| County<br><b>Outagamie</b>                                    | WI Unique Well # of Removed Well   | Hicap #  |
| Latitude / Longitude (see instructions)<br>_____ N<br>_____ W | Formal Code<br><input type="checkbox"/> DD<br><input type="checkbox"/> DDM | Method Code<br><input type="checkbox"/> GPS008<br><input type="checkbox"/> SCR002<br><input type="checkbox"/> OTH001 |
| 1/4 1/4 <b>SW</b> 1/4 <b>NE</b><br>or Gov't Lot #             | Section<br><b>33</b>   | Township<br><b>22 N</b>  |
| Well Street Address<br><b>W9899 Givens Road</b>               | Range<br><b>15</b>   | Original Well Owner  |
| Well City, Village or Town<br><b>Hortonville</b>              | Well ZIP Code<br><b>54944</b>  | Present Well Owner<br><b>John Ahlgrimm</b>   |
| Subdivision Name  | Lot #  | Mailing Address of Present Owner<br><b>1829 Ravenswood Court</b>   |
| Reason for Removal from Service<br><b>Closure</b>             | WI Unique Well # of Replacement Well                                       | City of Present Owner<br><b>Appleton</b>   |
|   |  | State<br><b>WI</b>   |
|   |  | ZIP Code<br><b>54913</b>   |

**2. Facility / Owner Information**

Facility Name  
**Ahlgrimm Explosives Co Inc - Prill Area**

Facility ID (FID or PWS)

License/Permit/Monitoring #

Original Well Owner

Present Well Owner  
**John Ahlgrimm**

Mailing Address of Present Owner  
**1829 Ravenswood Court**

City of Present Owner  
**Appleton**

State  
**WI**

ZIP Code  
**54913**

**3. Filled & Sealed Well / Drillhole / Borehole Information**

Monitoring Well      Original Construction Date (mm/dd/yyyy)  
**9/16/2015**

Water Well      **MW-7**

Borehole / Drillhole

If a Well Construction Report is available, please attach.

Construction Type:  
 Drilled       Driven (Sandpoint)       Dug  
 Other (specify): **Air Hammer**

Formation Type:  
 Unconsolidated Formation       Bedrock

|   |                                   |
|---|-----------------------------------|
| Total Well Depth From Ground Surface (ft.)<br><b>14</b> | Casing Diameter (in.)<br><b>1</b> |
| Lower Drillhole Diameter (in.)<br><b>3.5</b>            | Casing Depth (ft.)<br><b>14</b>   |

Was well annular space grouted?     Yes     No     Unknown

If yes, to what depth (feet)?      Depth to Water (feet)  
**11.53**

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

Pump and piping removed?     Yes     No     N/A

Liner(s) removed?     Yes     No     N/A

Liner(s) perforated?     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

Required Method of Placing Sealing Material  
 Conductor Pipe-Gravity     Conductor Pipe-Pumped  
 Screened & Poured (Bentonite Chips)     Other (Explain): \_\_\_\_\_

Sealing Materials  
 Neat Cement Grout       Concrete  
 Sand-Cement (Concrete) Grout       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.) | No. Yards, Sacks Sealant or Volume (circle one) | Mix Ratio or Mud Weight |
|------------|----------|---|-------------------------|
| Surface    | 14       | Yz bag  |                         |
|            |          |   |                         |

**6. Comments**

**removed 1" casing and screen from ground.**

**7. Supervision of Work**

|   |   |   |                              |          |
|---|---|---|------------------------------|----------|
| Name of Person or Firm Doing Filling & Sealing<br><b>Paul Lenaker</b> | License #                                 | Date of Filling & Sealing or Verification (mm/dd/yyyy)<br><b>3/6/18</b> | <b>DNR Use Only</b>          |          |
| Street or Route<br><b>9856 S. 57th Street</b>                         | Telephone Number<br><b>(414) 423-0255</b> | Comments  | Date Received                | Noted By |
| City<br><b>Franklin</b>   | State<br><b>WI</b>                        | Signature of Person Doing Work<br><b>DL</b>                             | Date Signed<br><b>3/6/18</b> |          |
| ZIP Code<br><b>53132</b>  |   |   |                              |          |

|   |  |  |
|---|--|--|
| Facility/Project Name<br><u>Ahlgrimm Explosives</u> | Local Grid Location of Well<br>ft. <input type="checkbox"/> N. <input type="checkbox"/> E. <input type="checkbox"/> S. <input type="checkbox"/> W.   | Well Name<br><u>MW7</u>  |
| Facility License, Permit or Monitoring No.          | Local Grid Origin (estimated: <input type="checkbox"/> ) or Well Location <input type="checkbox"/><br>Lat. " Long. " or " "  | Wis. Unique Well No. <u>DNR Well ID No.</u>  |
| Facility ID   | St. Plane ft. N. ft. E. S/C/N  | Date Well Installed<br><u>09 16 / 2015</u><br>m m d d y y y y  |
| Type of Well<br>Well Code <u>/</u>                  | Section Location of Waste/Source<br>1/4 of 1/4 of Sec. T. N, R. <input type="checkbox"/> E <input type="checkbox"/> W  | Well Installed By: Name (first, last) and Firm<br><u>Brett@Jeff-Ahlgrimm</u><br><u>Paul Lenakar-Terracon</u> |
| Distance from Waste/Source ft. <u>        </u>      | Location of Well Relative to Waste/Source<br>u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient<br>d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known |  |

|   |  |
|---|--|
| <p>A. Protective pipe, top elevation ----- ft. MSL</p> <p>B. Well casing, top elevation ----- ft. MSL</p> <p>C. Land surface elevation ----- ft. MSL</p> <p>D. Surface seal, bottom ----- ft. MSL or ----- ft.</p> <div style="border: 1px solid black; padding: 5px;"> <p>12. USCS classification of soil near screen:<br/>GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/><br/>SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/><br/>Bedrock <input checked="" type="checkbox"/></p> <p>13. Sieve analysis performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>14. Drilling method used: Rotary <input type="checkbox"/> 50<br/>Hollow Stem Auger <input type="checkbox"/> 41<br/><u>Air hammer</u> Other <input checked="" type="checkbox"/></p> <p>15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input checked="" type="checkbox"/> 01<br/>Drilling Mud <input type="checkbox"/> 03 None <input type="checkbox"/> 99</p> <p>16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br/>Describe _____</p> <p>17. Source of water (attach analysis, if required):<br/><u>n/a</u></p> </div> <p>E. Bentonite seal, top ----- ft. MSL or <u>0</u> ft.</p> <p>F. Fine sand, top ----- ft. MSL or <u>n/a</u> ft.</p> <p>G. Filter pack, top ----- ft. MSL or <u>3.5</u> ft.</p> <p>H. Screen joint, top ----- ft. MSL or <u>4.0</u> ft.</p> <p>I. Well bottom ----- ft. MSL or <u>14.0</u> ft.</p> <p>J. Filter pack, bottom ----- ft. MSL or <u>16.0</u> ft.</p> <p>K. Borehole, bottom ----- ft. MSL or <u>18.0</u> ft.</p> <p>L. Borehole, diameter <u>3.5</u> in.</p> <p>M. O.D. well casing <u>1.32</u> in.</p> <p>N. I.D. well casing <u>1.03</u> in.</p> | <p>1. Cap and lock? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>2. Protective cover pipe:<br/>a. Inside diameter: ----- in.<br/>b. Length: ----- ft.<br/>c. Material: Steel <input type="checkbox"/> 04<br/>Other <input type="checkbox"/></p> <p>d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br/>If yes, describe: _____</p> <p>3. Surface seal: Bentonite <input checked="" type="checkbox"/> 30<br/>Concrete <input type="checkbox"/> 01<br/>Other <input type="checkbox"/></p> <p>4. Material between well casing and protective pipe: Bentonite <input type="checkbox"/> 30<br/>Other <input type="checkbox"/></p> <p>5. Annular space seal: a. Granular/Chipped Bentonite <input type="checkbox"/> 33<br/>b. _____ Lbs/gal mud weight ... Bentonite-sand slurry <input type="checkbox"/> 35<br/>c. _____ Lbs/gal mud weight ... Bentonite slurry <input type="checkbox"/> 31<br/>d. _____ % Bentonite ... Bentonite-cement grout <input type="checkbox"/> 50<br/>e. _____ Ft<sup>3</sup> volume added for any of the above<br/>f. How installed: Tremie <input type="checkbox"/> 01<br/>Tremie pumped <input type="checkbox"/> 02<br/>Gravity <input type="checkbox"/> 08</p> <p>6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33<br/>b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 32<br/>c. _____ Other <input type="checkbox"/></p> <p>7. Fine sand material: Manufacturer, product name &amp; mesh size<br/>a. <u>N/A</u><br/>b. Volume added _____ ft<sup>3</sup></p> <p>8. Filter pack material: Manufacturer, product name &amp; mesh size<br/>a. <u>#40 Red Flint</u><br/>b. Volume added <u>1.5 bags</u> ft<sup>3</sup></p> <p>9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23<br/>Flush threaded PVC schedule 80 <input type="checkbox"/> 24<br/>Other <input type="checkbox"/></p> <p>10. Screen material: <u>pvc</u><br/>a. Screen type: Factory cut <input checked="" type="checkbox"/> 11<br/>Continuous slot <input type="checkbox"/> 01<br/>Other <input type="checkbox"/></p> <p>b. Manufacturer <u>Johnson</u><br/>c. Slot size: <u>0.010 in.</u><br/>d. Slotted length: <u>10 ft.</u></p> <p>11. Backfill material (below filter pack): None <input type="checkbox"/> 14<br/><u>3/8 chips bentonite</u> Other <input checked="" type="checkbox"/></p> |
|---|--|

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

Signature Paul A Lenaker Firm Terracon

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

**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**

County: Outagamie      WI Unique Well # of Removed Well: \_\_\_\_\_      Hicap #: \_\_\_\_\_

Latitude / Longitude (see instructions): \_\_\_\_\_ N      Format Code:  DD      Method Code:  GPS008  
 \_\_\_\_\_ W       DDM       SCR002  
 \_\_\_\_\_  OTH001

1/4 SW      1/4 NE      Section: 33      Township: 22 N      Range: 15  E  W

Well Street Address: W9899 Givens Road

Well City, Village or Town: Hortonville      Well ZIP Code: 54944

Subdivision Name: \_\_\_\_\_      Lot #: \_\_\_\_\_

Reason for Removal from Service: Closure      WI Unique Well # of Replacement Well: \_\_\_\_\_

**3. Filled & Sealed Well / Drillhole / Borehole Information**

Monitoring Well      Original Construction Date (mm/dd/yyyy): 9/16/2015

Water Well MW-8

Borehole / Drillhole

If a Well Construction Report is available, please attach.

Construction Type:

Drilled       Driven (Sandpoint)       Dug

Other (specify): Air Hammer

Formation Type:

Unconsolidated Formation       Bedrock

Total Well Depth From Ground Surface (ft.): 21      Casing Diameter (in.): 1

Lower Drillhole Diameter (in.): 3.5      Casing Depth (ft.): 21

Was well annular space grouted?       Yes       No       Unknown

If yes, to what depth (feet)?      Depth to Water (feet): unable to record

**5. Material Used to Fill Well / Drillhole**

3/8-inch bentonite chips

**2. Facility / Owner Information**

Facility Name: Ahlgrimm Explosives Co Inc - Prill Area

Facility ID (FID or PWS): \_\_\_\_\_

License/Permit/Monitoring #: \_\_\_\_\_

Original Well Owner: \_\_\_\_\_

Present Well Owner: John Ahlgrimm

Mailing Address of Present Owner: 1829 Ravenswood Court

City of Present Owner: Appleton      State: WI      ZIP Code: 54913

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

Pump and piping removed?       Yes       No       N/A

Liner(s) removed?       Yes       No       N/A

Liner(s) perforated?       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

Required Method of Placing Sealing Material

Conductor Pipe-Gravity       Conductor Pipe-Pumped

Screened & Poured (Bentonite Chips)       Other (Explain): \_\_\_\_\_

Sealing Materials

Neat Cement Grout       Concrete

Sand-Cement (Concrete) Grout       Bentonite Chips

For Monitoring Wells and Monitoring Well Boreholes Only:

Bentonite Chips       Bentonite - Cement Grout

Granular Bentonite       Bentonite - Sand Slurry

| From (ft.) | To (ft.) | No. Yards, Sacks Sealant or Volume (circle one) | Mix Ratio or Mud Weight |
|------------|----------|---|-------------------------|
| Surface    | 21       | 2 bag   |                         |

**6. Comments**

used Air Hammer (3.5" bit) to over-drill well to 8 feet hrs.

**7. Supervision of Work**

|   |   |   |                            |  |
|---|---|---|----------------------------|--|
| Name of Person or Firm Doing Filling & Sealing: <u>Paul Lenaker</u> | License #: _____                        | Date of Filling & Sealing or Verification (mm/dd/yyyy): <u>3/6/18</u> | <b>DNR Use Only</b>        |  |
| Street or Route: <u>9856 S. 57th Street</u>                         | Telephone Number: <u>(414) 423-0255</u> | Date Received: _____  | Noted By: _____            |  |
| City: <u>Franklin</u>   | State: <u>WI</u>                        | ZIP Code: <u>53132</u>  | Comments: _____            |  |
| Signature of Person Doing Work: <u>PL</u>                           |   |   | Date Signed: <u>3/6/18</u> |  |



|   |  |  |
|---|--|--|
| Facility/Project Name<br><u>Ahlgrimm Explosives</u> | Local Grid Location of Well<br>_____ ft. <input type="checkbox"/> N. _____ ft. <input type="checkbox"/> E.<br>_____ ft. <input type="checkbox"/> S. _____ ft. <input type="checkbox"/> W.                  | Well Name<br>MW8   |
| Facility License, Permit or Monitoring No.          | Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Well Location <input type="checkbox"/><br>Lat. _____ "Long. _____ " or _____  | Wis. Unique Well No. _____ DNR Well ID No. _____   |
| Facility ID   | St. Plane _____ ft. N. _____ ft. E. S/C/N  | Date Well Installed<br><u>09 16 / 2015</u><br>m m d d y y v v  |
| Type of Well<br>Well Code _____ / _____             | Section Location of Waste/Source<br>1/4 of _____ 1/4 of Sec. _____ T. _____ N, R. _____ <input type="checkbox"/> E<br><input type="checkbox"/> W   | Well Installed By: Name (first, last) and Firm<br><u>Brett@Jeff-Ahlgrimm</u><br><u>Paul Lenakar-Terracon</u> |
| Distance from Waste/Source _____ ft.                | Location of Well Relative to Waste/Source<br>u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient<br>d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known | Gov. Lot Number _____  |

|   |   |
|---|---|
| A. Protective pipe, top elevation _____ ft. MSL   | 1. Cap and lock? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |
| B. Well casing, top elevation _____ ft. MSL   | 2. Protective cover pipe:<br>a. Inside diameter: _____ in.<br>b. Length: _____ ft.<br>c. Material: Steel <input type="checkbox"/> 04<br>Other <input type="checkbox"/>  |
| C. Land surface elevation _____ ft. MSL   | d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, describe: _____  |
| D. Surface seal, bottom _____ ft. MSL or _____ ft.  | 3. Surface seal: Bentonite <input checked="" type="checkbox"/> 30<br>Concrete <input type="checkbox"/> 01<br>Other <input type="checkbox"/>   |
| 12. USCS classification of soil near screen:<br>GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/><br>SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/><br>Bedrock <input checked="" type="checkbox"/> | 4. Material between well casing and protective pipe:<br>Bentonite <input type="checkbox"/> 30<br>Other <input type="checkbox"/>   |
| 13. Sieve analysis performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   | 5. Annular space seal:<br>a. Granular/Chipped Bentonite <input type="checkbox"/> 33<br>b. _____ Lbs/gal mud weight . . . Bentonite-sand slurry <input type="checkbox"/> 35<br>c. _____ Lbs/gal mud weight . . . Bentonite slurry <input type="checkbox"/> 31<br>d. _____ % Bentonite . . . . Bentonite-cement grout <input type="checkbox"/> 50<br>e. _____ Ft <sup>3</sup> volume added for any of the above<br>f. How installed: Tremie <input type="checkbox"/> 01<br>Tremie pumped <input type="checkbox"/> 02<br>Gravity <input type="checkbox"/> 08 |
| 14. Drilling method used: Rotary <input type="checkbox"/> 50<br>Hollow Stem Auger <input type="checkbox"/> 41<br><u>Air hammer</u> Other <input checked="" type="checkbox"/>  | 6. Bentonite seal:<br>a. Bentonite granules <input type="checkbox"/> 33<br>b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 32<br>c. _____ Other <input type="checkbox"/>   |
| 15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input checked="" type="checkbox"/> 01<br>Drilling Mud <input type="checkbox"/> 03 None <input type="checkbox"/> 99  | 7. Fine sand material: Manufacturer, product name & mesh size<br>a. <u>N/A</u><br>b. Volume added _____ ft <sup>3</sup>   |
| 16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Describe _____  | 8. Filter pack material: Manufacturer, product name & mesh size<br>a. <u>#40 Red Flint</u><br>b. Volume added <u>1.5 bags</u> ft <sup>3</sup>   |
| 17. Source of water (attach analysis, if required):<br><u>n/a</u>   | 9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23<br>Flush threaded PVC schedule 80 <input type="checkbox"/> 24<br>Other <input type="checkbox"/>   |
| E. Bentonite seal, top _____ ft. MSL or <u>0</u> ft.  | 10. Screen material: <u>pvc</u><br>a. Screen type: Factory cut <input checked="" type="checkbox"/> 11<br>Continuous slot <input type="checkbox"/> 01<br>Other <input type="checkbox"/>  |
| F. Fine sand, top _____ ft. MSL or <u>n/a</u> ft.   | b. Manufacturer <u>Johnson</u><br>c. Slot size: <u>0.010</u> in.<br>d. Slotted length: <u>10</u> ft.  |
| G. Filter pack, top _____ ft. MSL or <u>10.5</u> ft.  | 11. Backfill material (below filter pack): None <input type="checkbox"/> 14<br><u>3/8 chips bentonite</u> Other <input checked="" type="checkbox"/>   |
| H. Screen joint, top _____ ft. MSL or <u>11.0</u> ft.   |   |
| I. Well bottom _____ ft. MSL or <u>21.0</u> ft.   |   |
| J. Filter pack, bottom _____ ft. MSL or <u>22.0</u> ft.   |   |
| K. Borehole, bottom _____ ft. MSL or <u>22.0</u> ft.  |   |
| L. Borehole, diameter <u>3.5</u> in.  |   |
| M. O.D. well casing <u>1.32</u> in.   |   |
| N. I.D. well casing <u>1.03</u> in.   |   |

I hereby certify that the information on this form is true and correct to the best of my knowledge.  
Signature \_\_\_\_\_ Paul A Lenakar Firm \_\_\_\_\_ Terracon

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

**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**

County: Outagamie      WI Unique Well # of Removed Well: \_\_\_\_\_      Hicap #: \_\_\_\_\_

Latitude / Longitude (see instructions): \_\_\_\_\_ N      Format Code:  DD      Method Code:  GPS008  
\_\_\_\_\_ W       DDM       SCR002  
 OTH001

1/4 SW      1/4 NE      Section: 33      Township: 22 N      Range: 15  E  W

Well Street Address: W9899 Givens Road

Well City, Village or Town: Hortonville      Well ZIP Code: 54944

Subdivision Name: \_\_\_\_\_      Lot #: \_\_\_\_\_

Reason for Removal from Service: Closure      WI Unique Well # of Replacement Well: \_\_\_\_\_

**3. Filled & Sealed Well / Drillhole / Borehole Information**

Monitoring Well      Original Construction Date (mm/dd/yyyy): 12/19/2017  
 Water Well MW-9  
 Borehole / Drillhole      If a Well Construction Report is available, please attach.

Construction Type:  
 Drilled       Driven (Sandpoint)       Dug  
 Other (specify): Air Hammer

Formation Type:  
 Unconsolidated Formation       Bedrock

Total Well Depth From Ground Surface (ft.): 31      Casing Diameter (in.): 1

Lower Drillhole Diameter (in.): 4      Casing Depth (ft.): 31

Was well annular space grouted?       Yes       No       Unknown

If yes, to what depth (feet)? \_\_\_\_\_      Depth to Water (feet): 26.07

**5. Material Used to Fill Well / Drillhole**

3/8-inch bentonite chips

**2. Facility / Owner Information**

Facility Name: Ahlgrimm Explosives Co Inc - Prill Area  
Facility ID (FID or PWS): \_\_\_\_\_

License/Permit/Monitoring #: \_\_\_\_\_

Original Well Owner: \_\_\_\_\_

Present Well Owner: John Ahlgrimm

Mailing Address of Present Owner: 1829 Ravenswood Court

City of Present Owner: Appleton      State: WI      ZIP Code: 54913

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

Pump and piping removed?       Yes       No       N/A  
Liner(s) removed?       Yes       No       N/A  
Liner(s) perforated?       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

Required Method of Placing Sealing Material:  
 Conductor Pipe-Gravity       Conductor Pipe-Pumped  
 Screened & Poured (Bentonite Chips)       Other (Explain): \_\_\_\_\_

Sealing Materials:  
 Neat Cement Grout       Concrete  
 Sand-Cement (Concrete) Grout       Bentonite Chips

For Monitoring Wells and Monitoring Well Boreholes Only:  
 Bentonite Chips       Bentonite - Cement Grout  
 Granular Bentonite       Bentonite - Sand Slurry

| From (ft.) | To (ft.) | No. Yards, Sacks Sealant or Volume (circle one) | Mix Ratio or Mud Weight |
|------------|----------|---|-------------------------|
| Surface    | 31       | 1 bag   |                         |

**6. Comments**

Removed top 2' of 1" casing from ground.

**7. Supervision of Work**

|  |   |   |                            |  |
|--|---|---|----------------------------|--|
| Name of Person or Firm Doing Filling & Sealing: <u>Paul Isaker</u> | License #: _____                        | Date of Filling & Sealing or Verification (mm/dd/yyyy): <u>3/6/18</u> | <b>DNR Use Only</b>        |  |
| Street or Route: <u>9856 S. 57th Street</u>                        | Telephone Number: <u>(414) 423-0255</u> | Date Received: _____  | Noted By: _____            |  |
| City: <u>Franklin</u>  | State: <u>WI</u>                        | ZIP Code: <u>53132</u>  | Comments: _____            |  |
| Signature of Person Doing Work: <u>PI</u>                          |   |   | Date Signed: <u>3/6/18</u> |  |

|   |  |  |  |   |  |
|---|--|--|--|---|--|
| Facility/Project Name<br><b>Ahlgrimm Explosives</b> |  | Local Grid Location of Well<br>_____ ft. <input type="checkbox"/> N. _____ ft. <input type="checkbox"/> E.<br>_____ ft. <input type="checkbox"/> S. _____ ft. <input type="checkbox"/> W.                  |  | Well Name<br><b>MW-9</b>  |  |
| Facility License, Permit or Monitoring No.          |  | Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Well Location <input type="checkbox"/>  |  | Wis. Unique Well No. DNR Well ID No.  |  |
| Facility ID   |  | Lat. _____ " Long. _____ " or _____  |  | Date Well Installed<br><b>12/19/2017</b><br>m m d d y y y y                                 |  |
| Type of Well<br>Well Code _____ / _____             |  | St. Plane _____ ft. N. _____ ft. E. S/C/N  |  | Well Installed By: Name (first, last) and Firm<br><b>DAL - Terracon<br/>Meru - Ahlgrimm</b> |  |
| Distance from Waste/<br>Source _____ ft.            |  | Section Location of Waste/Source<br>1/4 of _____ 1/4 of Sec. _____ T. _____ N, R. _____ <input type="checkbox"/> E <input type="checkbox"/> W  |  |   |  |
| Enf. Stds. Apply <input type="checkbox"/>           |  | Location of Well Relative to Waste/Source<br>u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient<br>d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known |  | Gov. Lot Number _____   |  |

|   |  |
|---|--|
| A. Protective pipe, top elevation _____ ft. MSL   | 1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
| B. Well casing, top elevation _____ ft. MSL   | 2. Protective cover pipe:<br>a. Inside diameter: _____ in.   |
| C. Land surface elevation _____ ft. MSL   | b. Length: <b>N/A</b> _____ ft.  |
| D. Surface seal, bottom _____ ft. MSL or _____ ft.  | c. Material: Steel <input type="checkbox"/> 04<br>Other <input type="checkbox"/>   |
| 12. USCS classification of soil near screen:<br>GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/><br>SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/><br>Bedrock <input checked="" type="checkbox"/> |  |
| 13. Sieve analysis performed? <input type="checkbox"/> Yes <input type="checkbox"/> No  |  |
| 14. Drilling method used: Rotary <input type="checkbox"/> 50<br>Hollow Stem Auger <input type="checkbox"/> 41<br><b>Air hammer</b> Other <input checked="" type="checkbox"/>  |  |
| 15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input checked="" type="checkbox"/> 01<br>Drilling Mud <input type="checkbox"/> 03 None <input type="checkbox"/> 99  |  |
| 16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Describe _____  |  |
| 17. Source of water (attach analysis, if required):<br><b>N/A</b>   |  |
| E. Bentonite seal, top _____ ft. MSL or <b>D</b> ft.  | 3. Surface seal: <b>Seal</b> Bentonite <input checked="" type="checkbox"/> 30<br>Concrete <input type="checkbox"/> 01<br>Other <input type="checkbox"/>  |
| F. Fine sand, top _____ ft. MSL or <b>N/A</b> ft.   | 4. Material between well casing and protective pipe:<br>Bentonite <input checked="" type="checkbox"/> 30<br>Other <input type="checkbox"/>   |
| G. Filter pack, top _____ ft. MSL or <b>18.9</b> ft.  | 5. Annular space seal:<br>a. Granular/Chipped Bentonite <input type="checkbox"/> 33<br>b. _____ Lbs/gal mud weight . . . Bentonite-sand slurry <input type="checkbox"/> 35<br>c. _____ Lbs/gal mud weight . . . . Bentonite slurry <input type="checkbox"/> 31<br>d. _____ % Bentonite . . . . . Bentonite-cement grout <input type="checkbox"/> 50<br>e. _____ Ft <sup>3</sup> volume added for any of the above<br>f. How installed: Tremie <input type="checkbox"/> 01<br>Tremie pumped <input type="checkbox"/> 02<br>Gravity <input checked="" type="checkbox"/> 08 |
| H. Screen joint, top _____ ft. MSL or <b>21.0</b> ft.   | 6. Bentonite seal:<br>a. Bentonite granules <input type="checkbox"/> 33<br>b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 32<br>c. _____ Other <input type="checkbox"/>  |
| I. Well bottom _____ ft. MSL or <b>31.0</b> ft.   | 7. Fine sand material: Manufacturer, product name & mesh size<br>a. _____<br>b. Volume added _____ ft <sup>3</sup>   |
| J. Filter pack, bottom _____ ft. MSL or <b>31.9</b> ft.   | 8. Filter pack material: Manufacturer, product name & mesh size<br>a. <b>#40 Red Flint</b><br>b. Volume added <b>2 3/4 bags</b> ft <sup>3</sup>  |
| K. Borehole, bottom _____ ft. MSL or <b>31.9</b> ft.  | 9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23<br>Flush threaded PVC schedule 80 <input type="checkbox"/> 24<br>Other <input type="checkbox"/>  |
| L. Borehole, diameter <b>4.0</b> in.  | 10. Screen material: <b>PVC</b><br>a. Screen type: Factory cut <input checked="" type="checkbox"/> 11<br>Continuous slot <input type="checkbox"/> 01<br>Other <input type="checkbox"/>   |
| M. O.D. well casing <b>1.32</b> in.   | b. Manufacturer <b>Johnson</b><br>c. Slot size: <b>0.010</b> in.<br>d. Slotted length: <b>1.0</b> ft.  |
| N. I.D. well casing <b>1.0</b> in.  | 11. Backfill material (below filter pack): None <input checked="" type="checkbox"/> 14<br>Other <input type="checkbox"/>   |

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

Signature \_\_\_\_\_ Firm \_\_\_\_\_

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

**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**

County: Outagamie      WI Unique Well # of Removed Well: \_\_\_\_\_      Hicap #: \_\_\_\_\_

Latitude / Longitude (see instructions): \_\_\_\_\_ N      Format Code:  DD      Method Code:  GPS008  
\_\_\_\_\_ W       DDM       SCR002  
 OTH001

1/4 Sw      1/4 NE      Section: 33      Township: 22 N      Range: 15  E  W

Well Street Address: W9899 Givens Road

Well City, Village or Town: Hortonville      Well ZIP Code: 54944

Subdivision Name: \_\_\_\_\_      Lot #: \_\_\_\_\_

Reason for Removal from Service: Closure      WI Unique Well # of Replacement Well: \_\_\_\_\_

**3. Filled & Sealed Well / Drillhole / Borehole Information**

Monitoring Well      Original Construction Date (mm/dd/yyyy): 9/16/2015  
 Water Well PZ-1  
 Borehole / Drillhole      If a Well Construction Report is available, please attach.

Construction Type:  
 Drilled       Driven (Sandpoint)       Dug  
 Other (specify): Air Hammer

Formation Type:  
 Unconsolidated Formation       Bedrock

Total Well Depth From Ground Surface (ft.): 34.9      Casing Diameter (in.): 1

Lower Drillhole Diameter (in.): 3.5      Casing Depth (ft.): 34.9

Was well annular space grouted?       Yes       No       Unknown

If yes, to what depth (feet)? \_\_\_\_\_      Depth to Water (feet): 34.9

**5. Material Used to Fill Well / Drillhole**

3/8-inch bentonite chips

**2. Facility / Owner Information**

Facility Name: Ahlgrimm Explosives Co Inc - Prill Area  
Facility ID (FID or PWS): \_\_\_\_\_

License/Permit/Monitoring #: \_\_\_\_\_

Original Well Owner: \_\_\_\_\_

Present Well Owner: John Ahlgrimm

Mailing Address of Present Owner: 1829 Ravenswood Court

City of Present Owner: Appleton      State: WI      ZIP Code: 54913

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

Pump and piping removed?       Yes       No       N/A  
Liner(s) removed?       Yes       No       N/A  
Liner(s) perforated?       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

Required Method of Placing Sealing Material:  
 Conductor Pipe-Gravity       Conductor Pipe-Pumped  
 Screened & Poured (Bentonite Chips)       Other (Explain): \_\_\_\_\_

Sealing Materials:  
 Neat Cement Grout       Concrete  
 Sand-Cement (Concrete) Grout       Bentonite Chips  
For Monitoring Wells and Monitoring Well Boreholes Only:  
 Bentonite Chips       Bentonite - Cement Grout  
 Granular Bentonite       Bentonite - Sand Slurry

| From (ft.) | To (ft.) | No. Yards, Sacks Sealant or Volume (circle one) | Mix Ratio or Mud Weight |
|------------|----------|---|-------------------------|
| Surface    | 34.9     | ~1 bag  |                         |

**6. Comments**

top 4' of 1" casing removed from ground.

**7. Supervision of Work**

|   |   |   |   |                            |
|---|---|---|---|----------------------------|
| Name of Person or Firm Doing Filling & Sealing: <u>Paul Lenaker</u> | License #: _____                        | Date of Filling & Sealing or Verification (mm/dd/yyyy): <u>3/6/18</u> | DNR Use Only                              |                            |
| Street or Route: <u>9856 S. 57th Street</u>                         | Telephone Number: <u>(414) 423-0255</u> | Comments: _____   | Date Received: _____                      | Noted By: _____            |
| City: <u>Franklin</u>   | State: <u>WI</u>                        | ZIP Code: <u>53132</u>  | Signature of Person Doing Work: <u>PL</u> | Date Signed: <u>3/6/18</u> |

|   |  |  |  |  |  |
|---|--|--|--|--|--|
| Facility/Project Name<br><b>Ahlgrimm Explosives</b> |  | Local Grid Location of Well<br>ft. <input type="checkbox"/> N. <input type="checkbox"/> E. <input type="checkbox"/> S. <input type="checkbox"/> W.   |  | Well Name<br><b>PZ1</b>  |  |
| Facility License, Permit or Monitoring No.          |  | Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Well Location <input type="checkbox"/>  |  | Wis. Unique Well No.   DNR Well ID No.   |  |
| Facility ID   |  | Lat. _____ " Long. _____ " or _____  |  | Date Well Installed<br><b>09 16 / 2015</b><br>m m d d y y v v  |  |
| Type of Well<br>Well Code _____ / _____             |  | Section Location of Waste/Source<br>1/4 of _____ 1/4 of Sec. _____ T. _____ N, R. _____ <input type="checkbox"/> E <input type="checkbox"/> W  |  | Well Installed By: Name (first, last) and Firm<br><b>Brett@Jeff-Ahlgrimm</b><br><b>Paul Lenakar-Terracon</b> |  |
| Distance from Waste/Source _____ ft.                |  | Location of Well Relative to Waste/Source<br>u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient<br>d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known |  | Gov. Lot Number _____  |  |

|   |                                  |  |   |
|---|----------------------------------|--|---|
| A. Protective pipe, top elevation   | ----- ft. MSL                    |  | 1. Cap and lock? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |
| B. Well casing, top elevation   | ----- ft. MSL                    |  | 2. Protective cover pipe:<br>a. Inside diameter: ----- in.<br>b. Length: ----- ft.<br>c. Material: Steel <input type="checkbox"/> 04<br>Other <input type="checkbox"/> _____<br>d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, describe: _____  |
| C. Land surface elevation   | ----- ft. MSL                    |  | 3. Surface seal:<br>Bentonite <input checked="" type="checkbox"/> 30<br>Concrete <input type="checkbox"/> 01<br>Other <input type="checkbox"/> _____  |
| D. Surface seal, bottom   | ----- ft. MSL or ----- ft.       |  | 4. Material between well casing and protective pipe:<br>Bentonite <input type="checkbox"/> 30<br>Other <input type="checkbox"/> _____   |
| 12. USCS classification of soil near screen:<br>GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/><br>SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/><br>Bedrock <input checked="" type="checkbox"/> |                                  |  | 5. Annular space seal:<br>a. Granular/Chipped Bentonite <input type="checkbox"/> 33<br>b. _____ Lbs/gal mud weight ... Bentonite-sand slurry <input type="checkbox"/> 35<br>c. _____ Lbs/gal mud weight ... Bentonite slurry <input type="checkbox"/> 31<br>d. _____ % Bentonite ... Bentonite-cement grout <input type="checkbox"/> 50<br>e. _____ Ft <sup>3</sup> volume added for any of the above<br>f. How installed: Tremie <input type="checkbox"/> 01<br>Tremie pumped <input type="checkbox"/> 02<br>Gravity <input type="checkbox"/> 08 |
| 13. Sieve analysis performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |                                  |  | 6. Bentonite seal:<br>a. Bentonite granules <input type="checkbox"/> 33<br>b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 32<br>c. _____ Other <input type="checkbox"/> _____   |
| 14. Drilling method used: Rotary <input type="checkbox"/> 50<br>Hollow Stem Auger <input type="checkbox"/> 41<br><u>Air hammer</u> Other <input checked="" type="checkbox"/> _____  |                                  |  | 7. Fine sand material: Manufacturer, product name & mesh size<br>a. <u>N/A</u><br>b. Volume added _____ ft <sup>3</sup>   |
| 15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input checked="" type="checkbox"/> 01<br>Drilling Mud <input type="checkbox"/> 03 None <input type="checkbox"/> 99  |                                  |  | 8. Filter pack material: Manufacturer, product name & mesh size<br>a. <u>#40 Red Flint</u><br>b. Volume added <u>1 bag</u> ft <sup>3</sup>  |
| 16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Describe _____  |                                  |  | 9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23<br>Flush threaded PVC schedule 80 <input type="checkbox"/> 24<br>Other <input type="checkbox"/> _____   |
| 17. Source of water (attach analysis, if required):<br><u>n/a</u>   |                                  |  | 10. Screen material: <u>pvc</u><br>a. Screen type: Factory cut <input checked="" type="checkbox"/> 11<br>Continuous slot <input type="checkbox"/> 01<br>Other <input type="checkbox"/> _____<br>b. Manufacturer <u>Johnson</u><br>c. Slot size: <u>0.010 in.</u><br>d. Slotted length: <u>5 ft.</u>   |
| E. Bentonite seal, top  | ----- ft. MSL or <u>0</u> ft.    |  | 11. Backfill material (below filter pack):<br><u>#40 Red Flint</u> None <input type="checkbox"/> 14<br>Other <input checked="" type="checkbox"/> _____  |
| F. Fine sand, top   | ----- ft. MSL or <u>n/a</u> ft.  |  |   |
| G. Filter pack, top   | ----- ft. MSL or <u>28.0</u> ft. |  |   |
| H. Screen joint, top  | ----- ft. MSL or <u>29.9</u> ft. |  |   |
| I. Well bottom  | ----- ft. MSL or <u>34.9</u> ft. |  |   |
| J. Filter pack, bottom  | ----- ft. MSL or <u>36.0</u> ft. |  |   |
| K. Borehole, bottom   | ----- ft. MSL or <u>36.0</u> ft. |  |   |
| L. Borehole, diameter   | <u>3.5</u> in.                   |  |   |
| M. O.D. well casing   | <u>1.32</u> in.                  |  |   |
| N. I.D. well casing   | <u>1.03</u> in.                  |  |   |

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

Signature: Paul A Lenakar Firm: Terracon

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