

# Letter of Transmittal

**Submitted to:**

**Matthew Vitale**

WI Dept. of Natural Resources  
1300 W. Clairemont Ave  
Eau Claire WI 54601

Date:

11/29/2017

Attached

Job:

WI DOT Burrows Road Acquisition

Under Separate Cover

Contents:

AKA Polzers Gas Station - Former  
Well Abandonment Forms  
BRRTS #: 02-62-558281

Remarks:

Attached are the well abandonment forms as requested in your "Remaining Actions Needed" letter dated 11/2/17. No investigative waste remains on-site. Following the review of this information please forward the "Final Closure" letter to our client and copy METCO.

If you have any questions please call or email.

Signed: Jason Powell

cc: Cindy Gerke-Edwards -  
J Squared Properties Inc.

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

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to:  
 Drinking Water       Watershed/Wastewater       Remediation/Redevelopment  
 Waste Management       Other: \_\_\_\_\_

1. Well Location Information				2. Facility / Owner Information			
County	WI Unique Well # of Removed Well	Hicap #		Facility Name			
TREMPEALEAU	____ VP320			WI DOT Burrows Road Acquisitio			
Latitude / Longitude (Degrees and Minutes)		Method Code (see instructions)		Facility ID (FID or PWS)			
44 ° 21.3667 ' N				6620034010			
91 ° 25.4667 ' W				License/Permit/Monitoring #			
				Original Well Owner			
				J Squared Properties			
				Present Well Owner			
				J Squared Properties			
				Mailing Address of Present Owner			
				901 Rose Street			
				City of Present Owner		State	ZIP Code
				La Crosse		WI	54603-

Reason For Removal From Service	WI Unique Well # of Replacement Well	4. Pump, Liner, Screen, Casing & Sealing Material			
Sampling Complete	_____	Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
3. Well / Drillhole / Borehole Information		Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy)	Screen removed?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
<input type="checkbox"/> Water Well	9/30/2015	Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.	Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Construction Type:		Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<input checked="" type="checkbox"/> Drilled	<input type="checkbox"/> Driven (Sandpoint)	Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
<input type="checkbox"/> Other (specify): _____		If yes, was hole retopped?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
		If bentonite chips were used, were they hydrated with water from a known safe source?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A

Formation Type:	Required Method of Placing Sealing Material	
<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
Total Well Depth From Ground Surface (ft.)	Casing Diameter (in.)	<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain): Gravity
24	2.4	
Lower Drillhole Diameter (in.)	Casing Depth (ft.)	Sealing Materials
8.25	14	<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)
Was well annular space grouted?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " "
If yes, to what depth (feet)?	Depth to Water (feet)	<input type="checkbox"/> Concrete <input checked="" type="checkbox"/> Bentonite Chips
10	18.21	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.)	Pounds
Bentonite Chips	Surface	24	36

6. Comments  
Monitoring Well MW-1

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing	License #	Date of Filling & Sealing (mm/dd/yyyy)	Date Received	Noted By
Bryce Kujawa (METCO)		11/20/2017		
Street or Route	Telephone Number		Comments	
709 Gillette Street	(608) 781-8879			
City	State	ZIP Code	Signature of Person Doing Work	Date Signed
La Crosse	WI	54603-	<i>Bryce Kujawa</i>	

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Verification Only of Fill and Seal

Route to:  
 Drinking Water       Watershed/Wastewater       Remediation/Redevelopment  
 Waste Management       Other: \_\_\_\_\_

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

County <b>TREMPEALEAU</b>	WI Unique Well # of Removed Well _____ <b>VP321</b> _____	Hicap #	Facility Name <b>WI DOT Burrows Road Acquisitio</b>
Latitude / Longitude (Degrees and Minutes) <b>44</b> ° <b>21.3667</b> 'N	Method Code (see instructions)		Facility ID (FID or PWS) <b>6620034010</b>
<b>91</b> ° <b>25.4667</b> 'W	¼ SW    ¼ NW    Section or Gov't Lot # <b>25</b>	Township    Range <input checked="" type="checkbox"/> E <b>22 N    9    <input type="checkbox"/> W</b>	License/Permit/Monitoring #
Well Street Address <b>23867 Burrows Road</b>	Well City, Village or Town <b>Independence</b>		Original Well Owner <b>J Squared Properties</b>
Well ZIP Code <b>54747-</b>	Subdivision Name		Present Well Owner <b>J Squared Properties</b>
Lot #	Well ZIP Code <b>54747-</b>		Mailing Address of Present Owner <b>901 Rose Street</b>
Reason For Removal From Service <b>Sampling Complete</b>	WI Unique Well # of Replacement Well		City of Present Owner    State    ZIP Code <b>La Crosse    WI    54603-</b>

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

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>9/30/2015</b>	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.	Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Borehole / Drillhole		Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<input type="checkbox"/> Other (specify): _____		Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft.) <b>12</b>	Casing Diameter (in.) <b>2.4</b>	Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Lower Drillhole Diameter (in.) <b>8.25</b>	Casing Depth (ft.) <b>14</b>	If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet) <b>17.68</b>	If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If yes, to what depth (feet)? <b>10</b>		Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain): <b>Gravity</b>
<b>5. Material Used To Fill Well / Drillhole</b>	From (ft.)    To (ft.)    Pounds	Sealing Materials <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " " <input type="checkbox"/> Concrete <input checked="" type="checkbox"/> Bentonite Chips
Bentonite Chips	Surface    24    36	<b>For Monitoring Wells and Monitoring Well Boreholes Only:</b> <input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout <input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry

**6. Comments**  
Monitoring Well MW-2

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

Name of Person or Firm Doing Filling & Sealing <b>Bryce Kujawa (METCO)</b>	License #	Date of Filling & Sealing (mm/dd/yyyy) <b>11/20/2017</b>	Date Received	Noted By
Street or Route <b>709 Gillette Street</b>	Telephone Number <b>(608) 781-8879</b>	Comments		
City <b>La Crosse</b>	State <b>WI</b>	ZIP Code <b>54603-</b>	Signature of Person Doing Work <i>Bryce Kujawa</i>	Date Signed

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Verification Only of Fill and Seal

Route to:  
 Drinking Water       Watershed/Wastewater       Remediation/Redevelopment  
 Waste Management       Other: \_\_\_\_\_

1. Well Location Information				2. Facility / Owner Information			
County	WI Unique Well # of Removed Well	Hicap #		Facility Name			
TREMPEALEAU	____ VP322			WI DOT Burrows Road Acquisitio			
Latitude / Longitude (Degrees and Minutes)		Method Code (see instructions)		Facility ID (FID or PWS)			
44 ° 21.3667 ' N				6620034010			
91 ° 25.4667 ' W				License/Permit/Monitoring #			
				Original Well Owner			
				J Squared Properties			
				Present Well Owner			
				J Squared Properties			
				Mailing Address of Present Owner			
				901 Rose Street			
				City of Present Owner		State	ZIP Code
				La Crosse		WI	54603-
Reason For Removal From Service		WI Unique Well # of Replacement Well		4. Pump, Liner, Screen, Casing & Sealing Material			
Sampling Complete				Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
				Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
				Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
				Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
				Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
				Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
				Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
				If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
				If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
3. Well / Drillhole / Borehole Information		Original Construction Date (mm/dd/yyyy)					
<input checked="" type="checkbox"/> Monitoring Well		9/30/2015					
<input type="checkbox"/> Water Well		If a Well Construction Report is available, please attach.					
<input type="checkbox"/> Borehole / Drillhole							
Construction Type:							
<input checked="" type="checkbox"/> Drilled		<input type="checkbox"/> Driven (Sandpoint)		<input type="checkbox"/> Dug			
<input type="checkbox"/> Other (specify): _____							
Formation Type:				Required Method of Placing Sealing Material			
<input checked="" type="checkbox"/> Unconsolidated Formation		<input type="checkbox"/> Bedrock		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped			
Total Well Depth From Ground Surface (ft.)		Casing Diameter (in.)		<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain): Gravity			
23		2.4					
Lower Drillhole Diameter (in.)		Casing Depth (ft.)		Sealing Materials			
8.25		13		<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)			
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown				<input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " "			
If yes, to what depth (feet)?		Depth to Water (feet)		<input type="checkbox"/> Concrete <input checked="" type="checkbox"/> Bentonite Chips			
9		14.78		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.)	Pounds
Bentonite Chips	Surface	23	34.5		
6. Comments					
Monitoring Well MW-3					
7. Supervision of Work			DNR Use Only		
Name of Person or Firm Doing Filling & Sealing	License #	Date of Filling & Sealing (mm/dd/yyyy)	Date Received	Noted By	
Bryce Kujawa (METCO)		11/20/2017			
Street or Route	Telephone Number	Comments			
709 Gillette Street	(608) 781-8879				
City	State	ZIP Code	Signature of Person Doing Work	Date Signed	
La Crosse	WI	54603-	<i>Bryce Kujawa</i>		

**Well / Drillhole / Borehole Filling & Sealing**

Form 3300-005 (R 4/08)

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Verification Only of Fill and Seal

Route to:

Drinking Water       Watershed/Wastewater       Remediation/Redevelopment

Waste Management       Other: \_\_\_\_\_

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

County <b>TREMPEALEAU</b>		WI Unique Well # of Removed Well <b>VP323</b>	Uicap #	Facility Name <b>WI DOT Burrows Road Acquisitio</b>	
Latitude / Longitude (Degrees and Minutes) <b>44 ° 21.3667 ' N</b>		Method Code (see instructions)		Facility ID (FID or PWS) <b>6620034010</b>	
<b>91 ° 25.4667 ' W</b>				License/Permit/Monitoring #	
1/4 SW	1/4 NW	Section <b>25</b>	Township <b>22 N</b>	Range <b>9</b>	Original Well Owner <b>J Squared Properties</b>
or Gov't Lot #				<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Present Well Owner <b>J Squared Properties</b>
Well Street Address <b>23867 Burrows Road</b>				Mailing Address of Present Owner <b>901 Rose Street</b>	
Well City, Village or Town <b>Independence</b>		Well ZIP Code <b>54747-</b>		City of Present Owner <b>La Crosse</b>	
Subdivision Name		Lot #		State <b>WI</b>	ZIP Code <b>54603-</b>

Reason For Removal From Service: **Sampling Complete**

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

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

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>9/30/2015</b>	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.	Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Borehole / Drillhole		Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<input type="checkbox"/> Other (specify): _____		Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft.) <b>12</b>	Casing Diameter (in.) <b>2.4</b>	Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Lower Drillhole Diameter (in.) <b>8.25</b>	Casing Depth (ft.) <b>2</b>	If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet) <b>2.64</b>	If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If yes, to what depth (feet)?		Required Method of Placing Sealing Material: <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain): <b>Gravity</b>
Sealing Materials: <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " " <input type="checkbox"/> Concrete <input 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.)	Pounds
Bentonite Chips	Surface	12	18

**6. Comments**  
Monitoring Well MW-4

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>	
Name of Person or Firm Doing Filling & Sealing <b>Bryce Kujawa (METCO)</b>	License #	Date of Filling & Sealing (mm/dd/yyyy) <b>11/20/2017</b>	Date Received	Noted By
Street or Route <b>709 Gillette Street</b>		Telephone Number <b>(608) 781-8879</b>	Comments	
City <b>La Crosse</b>	State <b>WI</b>	ZIP Code <b>54603-</b>	Signature of Person Doing Work <i>Bryce Kujawa</i>	Date Signed