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July 19, 2016

Mr. John Robinson  
Wisconsin Department of Natural Resources  
5301 Rib Mountain Dr.  
Wausau, WI 54401

Subject: Addendum #1 - Excavation Management Plan, Belknap Street (USH 2),  
Superior, Douglas County, Wisconsin  
WisDOT Project ID #8680-00-01(71)

Dear Mr. Robinson:

This letter provides Addendum #1 for the Excavation Management Plan and Special Provisions for the management of contaminated soil and groundwater for Belknap Street (USH 2) located in Superior, Douglas County, Wisconsin (WisDOT ID # 8680-00-01(71)). This addendum has been prepared to incorporate the results of the recent subsurface soil investigation for the proposed water main construction. Revised tables, figures, and special provisions have been included.

On July 6-7, 2016, TRC on behalf of Superior Water Light and Power (SWLP), completed a subsurface soil investigation along the proposed water main to be constructed as part of the USH 2 Belknap Street project in 2017-2018. The primary goal of the investigation was to assist SWLP to select the type of materials for the proposed water main. Completed soil boring logs and borehole abandonment forms from the July 2016 investigation are attached.

The results of this and previous investigations along the Belknap Street construction corridor indicate that contaminated soil and/or groundwater exists within the limits of the above referenced corridor at:

- **Site 3** – on Belknap Street at Station 143+40 to 144+60 from 30 feet right of the reference line to the project limits on the right (petroleum)
- **Site 4** – on Belknap Street at Station 144+55 to 145+30 from 30 feet left of the reference line to the project limits on the left, and on Ogden Avenue at Station 100+30 to 101+75 from the reference line to the project limits on the left (low-level petroleum)

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- **Site 5** – on Belknap Street at Station 145+40 to 146+75 from 30 feet right of the reference line to the project limits on the right, and on Ogden Avenue at Station 99+25 to 99+75 from approximately 15 feet right of reference line to the project limits to the right (petroleum)
- **Site 6 and 7** – on Belknap Street at Station 147+40 to 148+25 from the reference line to the project limits on the left, and from 148+25 to 150+75 within the project limits, and on John Avenue at Station 299+75 to 301+25 within in the project limits (petroleum)
- **Site 8** – on John Avenue at Station 298+50 to 299+75 with in the project limits (low-level petroleum)
- **Site 10** – on Hughitt Avenue at Station 308+25 to 309+50 from the reference line to the project limits on the right (petroleum)
- **Sites 11 and 12** – on Belknap Street at Station 154+25 to 156+40 from the reference line to the project limits to the right, and on Hammond Avenue at Station 329+30 to 330+00 from approximately 5 feet left of the reference line to the project limits left (petroleum)
- **Site 17** – on Belknap Street at Station 160+40 to 161+00 from approximately 20 feet left of the reference line to the project limits on the left, and on Cumming Avenue at Station 340+75 to 341+75 from the project limits on the left to the project limits on the right (petroleum)
- **Site 19** – on Belknap Street at Station 165+50 to 167+45 from approximately 20 feet left of the reference line to the project limits on the right (petroleum)
- **Site 20** – on Belknap Street at Station 168+15 to 169+40 from 30 feet right of the reference line to the project limits on the right (petroleum)
- **Site 22** – on Belknap Street at Station 173+00 to 174+00 from approximately 15 feet right of the reference line to the project limits on the right (petroleum), and on Clough Avenue at Station 388+15 to 389+75 from approximately 15 feet right of the reference line to the project limits to the left (chlorinated)
- **Site 26** – on Belknap Street at Station 179+25 to 180+25 from approximately 10 feet left of the reference line to the project limits on the left (petroleum)
- **Site 27** – on Belknap Street at Station 180+00 to 180+75 from the reference line to the project limits on the right (low-level petroleum)



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- **Site 28** – on Belknap Street at Station 181+10 to 182+90 from the project limits on the left to the project limits on the right, and on Catlin Avenue at Station 408+50 to 410+75 from the project limits on the left to the project limits on the right (petroleum)
- **Site 33** – on Belknap Street at Station 192+10 to 192+70 from 30 feet left of the reference line to the project limits on the left (lead)
- **Site 36** – on Belknap Street at Station 207+75 to 208+20 from approximately 15 feet right of the reference line to the project limits on the left, and on Hill Avenue at Station 499+75 to 500+75 from the reference line to the project limits on the left (petroleum)

Revised special provisions for the management of contaminated soil and groundwater during construction are attached to this report, including red-line edits to the previous special provisions.

As described in the Excavation Management Plan, some of the soil excavated from these areas may have significant petroleum related contamination and will require bioremediation and disposal at a WDNR-licensed treatment and disposal facility. The contamination will be determined based on laboratory results from previous investigations and field-screening; and all soil with elevated laboratory results, significant staining, or where applicable, elevated PID readings (for example, PID readings greater than 10 ppm) will be considered significantly contaminated and managed as contaminated soil for off-site disposal. Soil exhibiting low-level contamination (no odors, staining, or PID readings no greater than 10 ppm) in these areas will be considered suitable for reuse as backfill in the excavation from which it came. Excess low-level contaminated soil that cannot be reused as backfill in these areas, and low-level contaminated soil that is geotechnically unsuitable for reuse as backfill (to be determined by the WisDOT project engineer), will require disposal at a WDNR-licensed treatment and disposal facility. TRC estimates approximately 20,000 tons of petroleum-contaminated soil will require off-site disposal, at a unit cost of approximately \$50 per ton. This quantity is based on the assumption that none of the soils containing low-level contamination can be reused as backfill. The WisDOT project engineer will determine if project timing and adequate staging exists, and excavated material is suitable geotechnically for reuse as backfill.

To address the management of potential contaminated soil waste such as treated lumber from old foundations, a pay item for solid waste management has been included in the special provisions. TRC estimates approximately 50 tons of solid waste will require off-site disposal, at a unit cost of approximately \$50 per ton. The City of Superior will be the generator of the contaminated material.



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From an environmental standpoint, low-level contaminated soil encountered during excavations should, with WDNR concurrence, be reusable as backfill in the trenches and under the roadway surface. If reuse of lower-level contaminated soil is possible, it will reduce disposal quantities and associated costs.

Because the project PS&E is August 1, 2016, we request any edits or comments be provided by July 22, 2016 so they can be incorporated into the final special provisions.

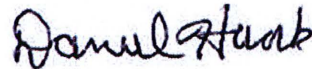
If you have any questions or comments, please feel free to contact Ted O'Connell, at 608-826-3648, or Daniel Haak at 608-826-3628.

Sincerely,

TRC Environmental Corporation



Ted O'Connell  
Environmental Scientist



Daniel Haak, P.E.  
Project Manager

Attachments: Table 1 – Summary of Analytical Results  
Figure 1 – Site Layout and Areas of VOC/PVOC Contamination  
Attachment 1 – Special Provisions  
Attachment 2 – Soil Boring Logs and Borehole Abandonment Forms

cc: Stephanie King – WDNR (hard copy and pdf on CD)  
Amy Adrihan – WisDOT (hard copy and pdf on CD)  
Jill Peterman – WisDOT (hard copy and pdf on CD)  
Shar TeBeest – WisDOT (hard copy and pdf on CD)  
James Morse – TRC





Table 1  
 Summary of Soil Analytical Results  
 Belknap Street (USH 2) Phase 2.5  
 WisDOT ID #8680-00-01 (71)  
 July 2012, December 2014, August 2015, and July 2016

ANALYTE	UNITS	NR 720 RCLs FOR SOIL				B2A	B2B	B3A	B3B	B3C	B4A	B4B	B4C	B5A	B5A	B5B	B5C	B5D	B5E	B5F	B5G	B6A	B6B	B6C
		GW PATH <sup>(1)</sup>	NON-INDUSTRIAL DIRECT CONTACT <sup>(2)</sup>	INDUSTRIAL DIRECT CONTACT <sup>(2)</sup>	BACKGROUND SURFICIAL BTV	10.0-13.0	7.5-10.0	7.5-10.0	7.5-10.0	0-2.5	7.5-10.0	5.0-7.5	5.0-7.5	0.0-2.5	5.0-7.5	2.0-5.0	10.0-13.0	8.0-10.0	8.0-10.0	8.0-10.0	8.0-10.0	7.5-10.0	10.0-13.0	8.0-10.0
DATE					Jul-12	Jul-12	Jul-12	Jul-12	Aug-15	Jul-12	Jul-12	Aug-15	Jul-12	Jul-12	Jul-12	Jul-12	Jul-16	Jul-16	Jul-16	Jul-16	Jul-12	Jul-12	Jul-16	
PID	ppm	--	--	--	--	2.5	2.2	3.7	4.3	1,281	3.6	191.7	13.4	500.1	1,440	1.8	399.7	<1.0	1.4	1	<1.0	707.6	903.5	<1.0
GRO	mg/kg	--	--	--	--	<3.6	<3.6	<3.3	<3.4	1,090	<3.2	34.9	--	203	134	<3.3	269	--	--	--	--	279	324	--
DRO	mg/kg	--	--	--	--	<1.1	<1.1	<0.97	<1.0	304	<1.1	3.1 T4	2.8	96.8 T4	10.9 T4	1.6J	6.0 T4	--	--	--	--	1.4J T4	16 T4	--
<b>VOCs/PVOCs<sup>(3)</sup></b>																								
1,2,4-Trimethylbenzene	µg/kg	1,382 <sup>(5)</sup>	89,800	219,000	--	<25.0	<25.0	<25.0	<25.0	<b>120,000</b>	<25.0	113	<25.0	1,350	3,970	<25.0	4,010	<25.0	<25.0	<25.0	<25.0	13,200	13,100	<25.0
1,3,5-Trimethylbenzene	µg/kg	1,382 <sup>(5)</sup>	182,000	182,000	--	<25.0	<25.0	<25.0	<25.0	31,300	<25.0	172	<25.0	1,680	1,410	<25.0	2,130	<25.0	<25.0	<25.0	<25.0	4,510	5,130	<25.0
Benzene	µg/kg	5.1	1,490	7,410	--	<25.0	<25.0	<25.0	<25.0	<b>2,410</b>	<25.0	<25.0	395	<b>77.8J</b>	<b>4,930</b>	<25.0	721	<25.0	<25.0	<25.0	<25.0	<b>6,630</b>	<b>1,920</b>	<25.0
cis-1,2-Dichloroethene	µg/kg	41.2	156,000	2,040,000	--	--	--	--	--	--	--	<25.0	--	--	--	--	--	--	--	--	--	--	--	--
Ethylbenzene	µg/kg	1,570	7,470	37,000	--	<25.0	<25.0	<25.0	<25.0	<b>13,400</b>	<25.0	113	179	472	2,060	<25.0	1,350	<25.0	<25.0	<25.0	<25.0	<b>8,110</b>	<b>8,500</b>	<25.0
Isopropylbenzene (cumene)	µg/kg	--	268,000	268,000	--	--	--	--	--	--	--	39.9 J	--	--	--	--	--	--	--	--	--	--	--	--
m&p-Xylene	µg/kg	3,960 <sup>(4)</sup>	260,000 <sup>(4)</sup>	260,000 <sup>(4)</sup>	--	<50.0	<50.0	<50.0	<50.0	64,500	<50.0	91.9J	<50.0	916	6,800	<50.0	4,780	<50.0	<50.0	<50.0	<50.0	20,200	6,110	<50.0
Methylene chloride	µg/kg	2.6	60,700	1,070,000	--	--	--	--	--	--	--	<25.0	--	--	--	--	--	--	--	--	--	--	--	--
Methyl-tert-butyl ether (MTBE)	µg/kg	27	59,400	293,000	--	<25.0	<25.0	<25.0	<25.0	<312	<25.0	<25.0	<25.0	<50.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	194J	298	<25.0
Naphthalene	µg/kg	658.2	5,150	26,000	--	<25.0	<25.0	<25.0	<25.0	<b>12,500</b>	<25.0	32.7J	<40.0	453	1,600	<25.0	1,340	<25.0	<25.0	<25.0	<25.0	2,370	873	<25.0
n-Butylbenzene	µg/kg	--	108,000	108,000	--	--	--	--	--	--	--	<25.0	--	--	--	--	--	--	--	--	--	--	--	--
n-Propylbenzene	µg/kg	--	264,000	264,000	--	--	--	--	--	--	--	34.8 J	--	--	--	--	--	--	--	--	--	--	--	--
o-Xylene	µg/kg	3,960 <sup>(4)</sup>	260,000 <sup>(4)</sup>	260,000 <sup>(4)</sup>	--	<25.0	<25.0	<25.0	<25.0	1,800	<25.0	<25.0	<25.0	1,010	2,770	<25.0	1,040	<25.0	<25.0	<25.0	<25.0	3,500	403	<25.0
p-Isopropyltoluene	µg/kg	--	162,000	162,000	--	--	--	--	--	--	--	45.9 J	--	--	--	--	--	--	--	--	--	--	--	--
sec-Butylbenzene	µg/kg	--	145,000	145,000	--	--	--	--	--	--	--	<25.0	--	--	--	--	--	--	--	--	--	--	--	--
Tetrachloroethene	µg/kg	4.5	30,700	153,000	--	--	--	--	--	--	--	<25.0	--	--	--	--	--	--	--	--	--	--	--	--
Trichloroethene	µg/kg	3.6	1,260	8,810	--	--	--	--	--	--	--	<25.0	--	--	--	--	--	--	--	--	--	--	--	--
Toluene	µg/kg	1,107.20	818,000	818,000	--	<25.0	<25.0	<25.0	<25.0	651 J	<25.0	<25.0	<25.0	190	4,470	<25.0	340	<25.0	<25.0	<25.0	<25.0	2,660	198	<25.0
<b>Total Metals</b>																								
Arsenic	mg/kg	0.584	0.613	2.39	8	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--
Barium	mg/kg	164.8	15,300	100,000	364	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--
Cadmium	mg/kg	0.752	70	799	1	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--
Chromium	mg/kg	360,000	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--
Lead	mg/kg	27	400	800	52	--	8.7	7.6	--	19.9	--	8.4	11.2	13.7	8.4	--	7.6	--	--	--	--	8.1	9	--
Mercury	mg/kg	0.208	3.13	3.13	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--
Selenium	mg/kg	0.52	391	5,110	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--
Silver	mg/kg	0.85	391	5,110	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

- Notes:
1. PID = Photoionization Detector
  2. J = Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.
  3. '---' = Not analyzed
  4. RCLs = Residual Contaminant Levels.
  5. '--' = Suggested RCL has not been established for this analyte
  6. '**Bold**' = indicates that the analyte and/or sample exceeds the NR 720 RCL for direct contact (non-industrial or industrial), or standards for hazard index or cancer risk unless value is less than BTV.
  7. '*Italics*' = indicates that the sample exceeds the groundwater pathway RCL.

- Footnotes:
- (1) Value is the generic RCL for the groundwater pathway.
  - (2) Value is the generic RCL for exposure by direct contact.
  - (3) Soil samples collected were analyzed for either PVOCs or the WI LUST 8260 list for VOCs. Only those analytes that were detected are listed. Non-detect results are reported on a wet weight basis.
  - (4) RCL is for total Xylenes
  - (5) RCL is for total Trimethylbenzenes.
- T4: Result reported for hydrocarbons within the method-specific range that do not match pattern of laboratory standard.  
 B: Analyte was detected in the associated blank.

Created By: Wesley Braga 8/15/12  
 Updated By: Ted O'Connell 9/1/15, Z. Boutaghov 7/12/2016  
 Checked By: Ted O'Connell 8/29/12  
 Checked By: A. Schroeder 1/13/16  
 Checked By: A. Schroeder 7/14/16

Table 1  
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 Belknap Street (USH 2) Phase 2.5  
 WisDOT ID #8680-00-01 (71)  
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ANALYTE	UNITS	NR 720 RCLs FOR SOIL				B7A	B7B	B7C	B8A	B8B	B8C	B8D	B9	B10A	B10B	B10C	B10D	B10E	B10F	B10G	B10H	B11	B11A	B11B
		GW PATH <sup>(1)</sup>	NON-INDUSTRIAL DIRECT CONTACT <sup>(2)</sup>	INDUSTRIAL DIRECT CONTACT <sup>(2)</sup>	BACKGROUND SURFICIAL BTV	7.5-10.0	3.0-5.0	8.0-10.0	1.0-3.0	0.0-2.5	10.0-12.0	8.0-10.0	2.5-5.0	3.0-5.0	7.5-10.0	0.0-2.5	2.5-5.0	8.0-10.0	8.0-10.0	8.0-10.0	8.0-10.0	10.0-13.0	8.0-10.0	8.0-10.0
DATE						Jul-12	Jul-12	Jul-16	Jul-12	Jul-12	Aug-15	Jul-16	Jul-12	Jul-12	Jul-12	Jul-12	Jul-16	Jul-16	Jul-16	Jul-16	Jul-12	Jul-16	Jul-16	
PID	ppm	--	--	--	--	3.7	2.5	<1.0	3.2	29.9	<1.0	<1.0	3	806.5	677.4	2.4	2.2	<1.0	<1.0	728	920	30.1	73	6.7
GRO	mg/kg	--	--	--	--	<2.8	<3.3	---	2.9	6.9	<3.0	---	<3.3	142	266	<3.1	<3.2	---	---	---	---	<3.5	---	---
DRO	mg/kg	--	--	--	--	<1.0	<1.0	---	21.4	24.0 T4	1.0 J	---	1.3J	2.2J	2	2.3	6.1 T4	---	---	---	---	<1.2	---	---
<b>VOCs/PVOCs<sup>(3)</sup></b>																								
1,2,4-Trimethylbenzene	µg/kg	1,382 <sup>(5)</sup>	89,800	219,000	--	<25.0	<25.0	<25.0	182	194	<25.0	<25.0	<25.0	785	1,500	<25.0	<25.0	<25.0	<25.0	2360	6,280	<25.0	<50.0	<25.0
1,3,5-Trimethylbenzene	µg/kg	1,382 <sup>(5)</sup>	182,000	182,000	--	<25.0	<25.0	<25.0	54.4J	38.7J	<25.0	<25.0	<25.0	909	1,780	<25.0	<25.0	<25.0	<25.0	1680	3,740	<25.0	70.9J	<25.0
Benzene	µg/kg	5.1	1,490	7,410	--	<25.0	<25.0	<25.0	341	<25.1	<25.0	<25.0	<25.0	<50.0	119J	<25.0	<25.0	<25.0	<25.0	<25.0	306	<b>2,810</b>	<b>14,100</b>	969
cis-1,2-Dichloroethene	µg/kg	41.2	156,000	2,040,000	--	<25.0	<25.0	---	---	---	<25.0	---	---	---	---	---	---	---	---	---	---	---	---	<25.0
Ethylbenzene	µg/kg	1,570	7,470	37,000	--	<25.0	<25.0	<25.0	143	<25.1	<25.0	<25.0	<25.0	462	1,560	<25.0	<25.0	<25.0	<25.0	1190	2,730	<25.0	110J	<25.0
Isopropylbenzene (cumene)	µg/kg	--	268,000	268,000	--	<25.0	<25.0	---	---	---	<25.0	---	---	---	---	---	---	---	---	---	---	---	<50.0	<25.0
m&p-Xylene	µg/kg	3,960 <sup>(4)</sup>	260,000 <sup>(4)</sup>	260,000 <sup>(4)</sup>	--	<50.0	<50.0	<50.0	373	<50.1	<50.0	<50.0	<50.0	393	949	<50.0	<50.0	<50.0	<50.0	2820	9,860	<50.0	1,460	67.7J
Methylene chloride	µg/kg	2.6	60,700	1,070,000	--	<25.0	<25.0	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	<50.0	<25.0
Methyl-tert-butyl ether (MTBE)	µg/kg	27	59,400	293,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	128J	<25.0	<25.0	<25.0	<25.0	114	288	<25.0	<50.0	<25.0
Naphthalene	µg/kg	658.2	5,150	26,000	--	<25.0	<25.0	<25.0	72.3	60.5J	<25.0	<25.0	<25.0	167	865	<25.0	<25.0	<25.0	<25.0	740	1,840	<25.0	158J	<40.0
n-Butylbenzene	µg/kg	--	108,000	108,000	--	<40.4	<40.4	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	<50.0	<25.0
n-Propylbenzene	µg/kg	--	264,000	264,000	--	<25.0	<25.0	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	<50.0	<25.0
o-Xylene	µg/kg	3,960 <sup>(4)</sup>	260,000 <sup>(4)</sup>	260,000 <sup>(4)</sup>	--	<25.0	<25.0	<25.0	108	<25.1	<25.0	<25.0	<25.0	<50.0	<50.0	<25.0	<25.0	<25.0	<25.0	399	2,070	<25.0	75.2J	<25.0
p-Isopropyltoluene	µg/kg	--	162,000	162,000	--	<25.0	<25.0	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	<50.0	<25.0
sec-Butylbenzene	µg/kg	--	145,000	145,000	--	<25.0	<25.0	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	<50.0	<25.0
Tetrachloroethene	µg/kg	4.5	30,700	153,000	--	<25.0	<25.0	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	<50.0	<25.0
Trichloroethene	µg/kg	3.6	1,260	8,810	--	<25.0	<25.0	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	<50.0	<25.0
Toluene	µg/kg	1,107.20	818,000	818,000	--	<25.0	<25.0	<25.0	237	<25.1	<25.0	<25.0	<25.0	81.9J	192	<25.0	<25.0	<25.0	<25.0	<25.0	1,450	<25.0	<50.0	<25.0
<b>Total Metals</b>																								
Arsenic	mg/kg	0.584	0.613	2.39	8	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Barium	mg/kg	164.8	15,300	100,000	364	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Cadmium	mg/kg	0.752	70	799	1	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Chromium	mg/kg	360,000	--	--	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Lead	mg/kg	27	400	800	52	5.2	8	---	---	14.6	6.6	---	9.7	5.1	---	7	---	---	---	---	---	---	---	---
Mercury	mg/kg	0.208	3.13	3.13	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Selenium	mg/kg	0.52	391	5,110	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Silver	mg/kg	0.85	391	5,110	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

- Notes:
1. PID = Photoionization Detector
  2. J = Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.
  3. '---' = Not analyzed
  4. RCLs = Residual Contaminant Levels.
  5. '--' = Suggested RCL has not been established for this analyte
  6. '**Bold**' = indicates that the analyte and/or sample exceeds the NR 720 RCL for direct contact (non-industrial or industrial), or standards for hazard index or cancer risk unless value is less than BTV.
  7. '*Italics*' = indicates that the sample exceeds the groundwater pathway RCL.

- Footnotes:
- (1) Value is the generic RCL for the groundwater pathway.
  - (2) Value is the generic RCL for exposure by direct contact.
  - (3) Soil samples collected were analyzed for either PVOCs or the WI LUST 8260 list for VOCs. Only those analytes that were detected are listed. Non-detect results are reported on a wet weight basis.
  - (4) RCL is for total Xylenes
  - (5) RCL is for total Trimethylbenzenes.
- T4: Result reported for hydrocarbons within the method-specific range that do not match pattern of laboratory standard.  
 B: Analyte was detected in the associated blank.

Created By: Wesley Braga 8/15/12  
 Updated By: Ted O'Connell 9/1/15, Z. Boutaghou 7/12/2016  
 Checked By: Ted O'Connell 8/29/12  
 Checked By: A. Schroeder 1/13/16  
 Checked By: A. Schroeder 7/14/16

Table 1  
 Summary of Soil Analytical Results  
 Belknap Street (USH 2) Phase 2.5  
 WisDOT ID #8680-00-01 (71)  
 July 2012, December 2014, August 2015, and July 2016

ANALYTE	UNITS	NR 720 RCLs FOR SOIL				B12A	B12B	B12C	B12D	B12E	B12F	B15A	B15B	B17A	B17B	B17C	B17D	B17E	B17F	B19A	B19B	B19C	B19D	B19E
		GW PATH <sup>(1)</sup>	NON-INDUSTRIAL DIRECT CONTACT <sup>(2)</sup>	INDUSTRIAL DIRECT CONTACT <sup>(2)</sup>	BACKGROUND SURFICIAL BTV	10.0-13.0	1.0-3.0	8.0-10.0	8.0-10.0	8.0-10.0	8.0-10.0	2.5-5.0	2.5-5.0	2.0-2.5	7.5-10	10.0-13.0	8.0-10.0	8.0-10.0	8.0-10.0	7.5-10.0	1.0-3.0	1.0-3.0	8.0-10.0	8.0-10.0
DATE					Jul-12	Jul-12	Jul-16	Jul-16	Jul-16	Jul-16	Jul-12	Jul-12	Jul-12	Jul-12	Jul-12	Jul-16	Jul-16	Jul-16	Jul-12	Jul-12	Jul-12	Jul-16	Jul-16	
PID	ppm	--	--	--	53.4	3.9	3.4	38.7	<1.0	<1.0	1.5	1.9	7.3	392	432.2	<1.0	156.4	<1.0	57.2	82.1	9.9	<1.0	26.7	
GRO	mg/kg	--	--	--	---	---	---	---	---	---	<3.2	<3.2	<3.3	421	107	---	---	---	4.3	<3.1	<3.1	---	---	
DRO	mg/kg	--	--	--	---	---	---	---	---	---	<1.2	<0.99	<1.1	3 T4	<1.1	---	---	---	1.7J T4	12.7 T4	1.3J	---	---	
<b>VOCs/PVOCs<sup>(3)</sup></b>																								
1,2,4-Trimethylbenzene	µg/kg	1,382 <sup>(5)</sup>	89,800	219,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	4,390	2,100	<25.0	2,320	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	
1,3,5-Trimethylbenzene	µg/kg	1,382 <sup>(5)</sup>	182,000	182,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	2,970	864	<25.0	1,290	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	
Benzene	µg/kg	5.1	1,490	7,410	--	<b>5,740</b>	<25.0	<b>2,990</b>	<b>8,630</b>	<25.0	<25.0	<25.0	<25.0	382	592	<25.0	479	<25.0	<b>5,900</b>	121	<25.0	<25.0	<b>5,570</b>	
cis-1,2-Dichloroethene	µg/kg	41.2	156,000	2,040,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	---	---	---	---	---	---	---	---	<25.0	<25.0	<25.0	---	---	
Ethylbenzene	µg/kg	1,570	7,470	37,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	3,390	1,080	<25.0	1,450	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	
Isopropylbenzene (cumene)	µg/kg	--	268,000	268,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	---	---	---	---	---	---	---	---	<25.0	<25.0	<25.0	---	---	
m&p-Xylene	µg/kg	3,960 <sup>(4)</sup>	260,000 <sup>(4)</sup>	260,000 <sup>(4)</sup>	--	<50.0	<50.0	393	871	<50.0	<50.0	<50.0	<50.0	2,640	2,370	<50.0	3,980	<25.0	<50.0	<50.0	<50.0	<50.0	<50.0	
Methylene chloride	µg/kg	2.6	60,700	1,070,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	---	---	---	---	---	---	---	---	<25.0	<25.0	<25.0	---	---	
Methyl-tert-butyl ether (MTBE)	µg/kg	27	59,400	293,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	42.5J	<25.0	89.7	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	
Naphthalene	µg/kg	658.2	5,150	26,000	--	<25.0	<25.0	<40.0	<40.0	<40.0	<25.0	<25.0	<25.0	1,420	686	<25.0	862	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	
n-Butylbenzene	µg/kg	--	108,000	108,000	--	<40.4	<40.4	<25.0	<25.0	<25.0	---	---	---	---	---	---	---	---	<40.4	<40.4	<40.4	---	---	
n-Propylbenzene	µg/kg	--	264,000	264,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	---	---	---	223	---	---	---	---	<25.0	<25.0	<25.0	---	---	
o-Xylene	µg/kg	3,960 <sup>(4)</sup>	260,000 <sup>(4)</sup>	260,000 <sup>(4)</sup>	--	<25.0	<25.0	<25.0	45.0J	<25.0	<25.0	<25.0	<25.0	<62.5	279	<25.0	373	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	
p-Isopropyltoluene	µg/kg	--	162,000	162,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	---	---	---	---	---	---	---	---	<25.0	<25.0	<25.0	---	---	
sec-Butylbenzene	µg/kg	--	145,000	145,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	---	---	---	---	---	---	---	---	<25.0	<25.0	<25.0	---	---	
Tetrachloroethene	µg/kg	4.5	30,700	153,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	---	---	---	---	---	---	---	---	<25.0	<25.0	<25.0	---	---	
Trichloroethene	µg/kg	3.6	1,260	8,810	--	<25.0	<25.0	<25.0	<25.0	<25.0	---	---	---	---	---	---	---	---	<25.0	<25.0	<25.0	---	---	
Toluene	µg/kg	1,107.20	818,000	818,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	349	460	<25.0	636	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	
<b>Total Metals</b>																								
Arsenic	mg/kg	0.584	0.613	2.39	8	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	
Barium	mg/kg	164.8	15,300	100,000	364	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	
Cadmium	mg/kg	0.752	70	799	1	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	
Chromium	mg/kg	360,000	--	--	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	
Lead	mg/kg	27	400	800	52	---	---	---	---	---	---	8.3	8.7	8.1	---	---	---	---	---	---	---	---	---	
Mercury	mg/kg	0.208	3.13	3.13	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	
Selenium	mg/kg	0.52	391	5,110	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	
Silver	mg/kg	0.85	391	5,110	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	

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  - J = Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.
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- Footnotes:
- Value is the generic RCL for the groundwater pathway.
  - Value is the generic RCL for exposure by direct contact.
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  - RCL is for total Xylenes
  - RCL is for total Trimethylbenzenes.
- T4: Result reported for hydrocarbons within the method-specific range that do not match pattern of laboratory standard.  
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Table 1  
Summary of Soil Analytical Results  
Belknap Street (USH 2) Phase 2.5  
WisDOT ID #8680-00-01 (71)  
July 2012, December 2014, August 2015, and July 2016

ANALYTE	UNITS	NR 720 RCLs FOR SOIL				B19F	B19G	B20A	B20B	B20C	B20D	B20E	B20F	B22A	B22B	B22C	B22D	B22E	B22F	B22G	B22H	B22I	B22J	B22K	B25	
		GW PATH <sup>(1)</sup>	NON-INDUSTRIAL DIRECT CONTACT <sup>(2)</sup>	INDUSTRIAL DIRECT CONTACT <sup>(2)</sup>	BACKGROUND SURFICIAL BTV	8.0-10.0	8.0-10.0	3.0-5.0	3.0-5.0	2.5-5.0	7.5-10	2.5-5.0	8.0-10.0	3.0-5.0	3.0-5.0	7.5-10.0	7.5-10	5-7.5	2.5-5.0	8.0-10.0	8.0-10.0	8.0-10.0	8.0-10.0	8.0-10.0	3.0-5.0	
DATE						Jul-16	Jul-16	Jul-12	Jul-12	Jul-12	Aug-15	Aug-15	Jul-16	Jul-12	Jul-12	Jul-12	Aug-15	Aug-15	Aug-15	Jul-16	Jul-16	Jul-16	Jul-16	Jul-16	Jul-12	
PID	ppm	--	--	--	--	20.0	<1.0	5.5	3	4	14.9	1,049	<1.0	576.5	5.5	59.3	<1.0	<1.0	<1.0	<1.0	<1.0	<1.0	<1.0	<1.0	3.4	
GRO	mg/kg	--	--	--	--	---	---	<3.2	<3.3	<3.3	<2.9	2,270	--	621	---	7.8	<3.4	--	--	--	--	--	--	--	<3.3	
DRO	mg/kg	--	--	--	--	---	---	1.5J	1.3J	<1.1	7.7	287	--	181 T4	---	5.0 T4	2.9	--	--	--	--	--	--	--	29.6 T4	
<b>VOCs/PVOCs<sup>(3)</sup></b>																										
1,2,4-Trimethylbenzene	µg/kg	1,382 <sup>(5)</sup>	89,800	219,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<b>158,000</b>	<25.0	288	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0
1,3,5-Trimethylbenzene	µg/kg	1,382 <sup>(5)</sup>	182,000	182,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<i>51,200</i>	<25.0	66.1J	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0
Benzene	µg/kg	5.1	1,490	7,410	--	<b>2,200</b>	<i>36.9J</i>	<25.0	<25.0	<25.0	<25.0	<b>1,970</b>	<25.0	<b>5,370</b>	<25.0	<b>6,140</b>	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	
cis-1,2-Dichloroethene	µg/kg	41.2	156,000	2,040,000	--	---	---	---	---	---	---	---	<25.0	920	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<i>56.8J</i>	<25.0	<25.0	<25.0	---	
Ethylbenzene	µg/kg	1,570	7,470	37,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<b>52,500</b>	<25.0	<i>1,600</i>	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	
Isopropylbenzene (cumene)	µg/kg	--	268,000	268,000	--	---	---	---	---	---	---	---	---	61.2J	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	---	
m&p-Xylene	µg/kg	3,960 <sup>(4)</sup>	260,000 <sup>(4)</sup>	260,000 <sup>(4)</sup>	--	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	<i>202,000</i>	<50.0	1,200	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	
Methylene chloride	µg/kg	2.6	60,700	1,070,000	--	---	---	---	---	---	---	---	---	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	---	
Methyl-tert-butyl ether (MTBE)	µg/kg	27	59,400	293,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	
Naphthalene	µg/kg	658.2	5,150	26,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<40.0	<25.0	102	<25.0	<25.0	<40.0	<40.0	<40.0	<40.0	<40.0	<40.0	<40.0	<40.0	<25.0	
n-Butylbenzene	µg/kg	--	108,000	108,000	--	---	---	---	---	---	---	---	---	52.7J	<40.4	<40.4	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	---	
n-Propylbenzene	µg/kg	--	264,000	264,000	--	---	---	---	---	---	---	---	---	64.0J	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	---	
o-Xylene	µg/kg	3,960 <sup>(4)</sup>	260,000 <sup>(4)</sup>	260,000 <sup>(4)</sup>	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<i>42,200</i>	<25.0	810	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	
p-Isopropyltoluene	µg/kg	--	162,000	162,000	--	---	---	---	---	---	---	---	---	82.5	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	---	
sec-Butylbenzene	µg/kg	--	145,000	145,000	--	---	---	---	---	---	---	---	---	<25.1	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	---	
Tetrachloroethene	µg/kg	4.5	30,700	153,000	--	---	---	---	---	---	---	---	---	<25.0	1,880	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	---	
Trichloroethene	µg/kg	3.6	1,260	8,810	--	---	---	---	---	---	---	---	---	<25.0	621	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	---	
Toluene	µg/kg	1,107.20	818,000	818,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	260	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	
<b>Total Metals</b>																										
Arsenic	mg/kg	0.584	0.613	2.39	8	---	---	---	---	---	---	---	---	<b>3.9</b>	---	<b>3.9</b>	---	---	---	---	---	---	---	---	---	
Barium	mg/kg	164.8	15,300	100,000	364	---	---	---	---	---	---	---	---	121	---	218	---	---	---	---	---	---	---	---	---	
Cadmium	mg/kg	0.752	70	799	1	---	---	---	---	---	---	---	---	<0.037	---	<0.037	---	---	---	---	---	---	---	---	---	
Chromium	mg/kg	360,000	--	--	--	---	---	---	---	---	---	---	---	31.9	---	59.6	---	---	---	---	---	---	---	---	---	
Lead	mg/kg	27	400	800	52	---	---	9	---	---	---	---	---	14.3	---	11.4	---	---	---	---	---	---	---	---	11.2	
Mercury	mg/kg	0.208	3.13	3.13	--	---	---	---	---	---	---	---	---	0.041	---	0.019	---	---	---	---	---	---	---	---	---	
Selenium	mg/kg	0.52	391	5,110	--	---	---	---	---	---	---	---	---	<0.58	---	<0.58	---	---	---	---	---	---	---	---	---	
Silver	mg/kg	0.85	391	5,110	--	---	---	---	---	---	---	---	---	0.47J	---	0.60J	---	---	---	---	---	---	---	---	---	

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  - RCLs = Residual Contaminant Levels.
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  - Bold** = indicates that the analyte and/or sample exceeds the NR 720 RCL for direct contact (non-industrial or industrial), or standards for hazard index or cancer risk unless value is less than BTV.
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- RCL is for total Xylenes
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T4: Result reported for hydrocarbons within the method-specific range that do not match pattern of laboratory standard.  
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Table 1  
 Summary of Soil Analytical Results  
 Belknap Street (USH 2) Phase 2.5  
 WisDOT ID #8680-00-01 (71)  
 July 2012, December 2014, August 2015, and July 2016

ANALYTE	UNITS	NR 720 RCLs FOR SOIL				B26A	B26B	B26C	B26D	B27	B28A	B28A	B28B	B28C	B28D	B28E	B28F	B28G	B28H	B28I	B28J	B28K	B28L	B29A	B29B		
		GW PATH <sup>(1)</sup>	NON-INDUSTRIAL DIRECT CONTACT <sup>(2)</sup>	INDUSTRIAL DIRECT CONTACT <sup>(2)</sup>	BACKGROUND SURFICIAL BTV	0.5-2.0	2.5-5.0	2.5-5.0	8.0-10.0	1.0-3.0	5-7.5	10.0-13.0	7.5-10.0	0.0-2.5	10.0-12.5	5.0-7.5	8.0-10.0	8.0-10.0	8.0-10.0	8.0-10.0	8.0-10.0	8.0-10.0	8.0-10.0	8.0-10.0	10.0-12.5	0-3	
DATE						Jul-12	Jul-12	Aug-15	Jul-16	Jul-12	Jul-12	Jul-12	Jul-12	Jul-12	Aug-15	Aug-15	Jul-16	Jul-16	Jul-16	Jul-16	Jul-16	Jul-16	Jul-16	Jul-12	Jul-12		
PID	ppm	--	--	--	--	75.6	1.5	5.6	<1.0	5.7	1,343	738.9	1,010	15.9	28	1.5	185.4	456	690	77.8	<1.0	1.1	<1.0	14.5	3.5		
GRO	mg/kg	--	--	--	--	---	---	<3.4	--	<3.0	589	127	124	<3.2	36.0	<3.3	--	--	--	--	--	--	--	<3.4	<3.0		
DRO	mg/kg	--	--	--	--	---	---	<0.89	--	74.1 T4	29.3 T4	14.8 T4	5.4 T4	1.4J	1.9J	3.7	--	--	--	--	--	--	--	<1.2	21.1 T4		
<b>VOCs/PVOCs<sup>(3)</sup></b>																											
1,2,4-Trimethylbenzene	µg/kg	1,382 <sup>(5)</sup>	89,800	219,000	--	4,110	<25.0	<25.0	<25.0	<25.0	21,500	4,180	5,000	<25.0	1,700	<25.0	1,240	3,870	2,570	3,150	<25.0	<25.0	<25.0	<25.0	<25.0		
1,3,5-Trimethylbenzene	µg/kg	1,382 <sup>(5)</sup>	182,000	182,000	--	808	<25.0	<25.0	<25.0	<25.0	6,880	1,260	1,500	<25.0	530	<25.0	316	1,130	705	887	<25.0	<25.0	<25.0	<25.0	<25.0		
Benzene	µg/kg	5.1	1,490	7,410	--	871	<25.0	<25.0	<25.0	<25.0	<b>21,900</b>	<b>14,200</b>	<b>11,900</b>	<25.0	<b>1,540</b>	<25.0	<b>6,040</b>	<b>5,650</b>	<b>9,790</b>	<b>4,900</b>	<25.0	<25.0	<25.0	<25.0	<25.0		
cis-1,2-Dichloroethene	µg/kg	41.2	156,000	2,040,000	--	<25.0	<25.0	<25.0	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---		
Ethylbenzene	µg/kg	1,570	7,470	37,000	--	1,210	<25.0	<25.0	<25.0	<25.0	<b>19,300</b>	4,170	3,700	<25.0	954	<25.0	1,510	3,710	2,340	2,530	<25.0	<25.0	<25.0	<25.0	<25.0		
Isopropylbenzene (cumene)	µg/kg	--	268,000	268,000	--	320	<25.0	<25.0	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---		
m&p-Xylene	µg/kg	3,960 <sup>(4)</sup>	260,000 <sup>(4)</sup>	260,000 <sup>(4)</sup>	--	3,890	<50.0	<50.0	<50.0	<50.0	42,900	9,470	9,810	<50.0	2,360	<50.0	3,390	7,530	5,580	6,340	<50.0	<50.0	<50.0	<50.0	<50.0		
Methylene chloride	µg/kg	2.6	60,700	1,070,000	--	<25.0	<25.0	<25.0	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---		
Methyl-tert-butyl ether (MTBE)	µg/kg	27	59,400	293,000	--	<25.0	<25.0	<25.0	---	<25.0	413	54.2J	47.6J	<25.0	<25.0	<25.0	<25.0	83.3	45.6J	39.1J	---	---	---	<25.0	<25.0		
Naphthalene	µg/kg	658.2	5,150	26,000	--	532	<25.0	<40.0	<25.0	<25.0	1,750	517	773	<25.0	285	<40.0	159	365	488	430	<25.0	186	<25.0	<25.0	<25.0		
n-Butylbenzene	µg/kg	--	108,000	108,000	--	453	<40.4	<25.0	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---		
n-Propylbenzene	µg/kg	--	264,000	264,000	--	947	<25.0	<25.0	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---		
o-Xylene	µg/kg	3,960 <sup>(4)</sup>	260,000 <sup>(4)</sup>	260,000 <sup>(4)</sup>	--	749	<25.0	<25.0	<25.0	<25.0	16,800	3,880	4,160	<25.0	518	<25.0	1,490	1,220	2,110	2,520	<25.0	<25.0	<25.0	<25.0	<25.0		
p-Isopropyltoluene	µg/kg	--	162,000	162,000	--	110	<25.0	<25.0	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---		
sec-Butylbenzene	µg/kg	--	145,000	145,000	--	183	<25.0	<25.0	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---		
Tetrachloroethene	µg/kg	4.5	30,700	153,000	--	<25.0	<25.0	<25.0	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---		
Trichloroethene	µg/kg	3.6	1,260	8,810	--	<25.0	<25.0	<25.0	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---		
Toluene	µg/kg	1,107.20	818,000	818,000	--	1,430	<25.0	<25.0	<25.0	<25.0	54,400	19,400	13,500	<25.0	<25.0	<25.0	8260	1100	6230	4720	<25.0	<25.0	<25.0	<25.0	<25.0		
<b>Total Metals</b>																											
Arsenic	mg/kg	0.584	0.613	2.39	8	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---		
Barium	mg/kg	164.8	15,300	100,000	364	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---		
Cadmium	mg/kg	0.752	70	799	1	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---		
Chromium	mg/kg	360,000	--	--	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---		
Lead	mg/kg	27	400	800	52	53.8	10.3	13.1	---	31.3	9.5	---	9	---	8.6	9.1	---	---	---	---	---	---	---	---	13		
Mercury	mg/kg	0.208	3.13	3.13	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---		
Selenium	mg/kg	0.52	391	5,110	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---		
Silver	mg/kg	0.85	391	5,110	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---		

- Notes:
- PID = Photoionization Detector
  - J = Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.
  - = Not analyzed
  - RCLs = Residual Contaminant Levels.
  - = Suggested RCL has not been established for this analyte
  - Bold** = indicates that the analyte and/or sample exceeds the NR 720 RCL for direct contact (non-industrial or industrial), or standards for hazard index or cancer risk unless value is less than BTV.
  - Italics* = indicates that the sample exceeds the groundwater pathway RCL.

- Footnotes:
- Value is the generic RCL for the groundwater pathway.
  - Value is the generic RCL for exposure by direct contact.
  - Soil samples collected were analyzed for either PVOCs or the WI LUST 8260 list for VOCs. Only those analytes that were detected are listed. Non-detect results are reported on a wet weight basis.
  - RCL is for total Xylenes
  - RCL is for total Trimethylbenzenes.
- T4: Result reported for hydrocarbons within the method-specific range that do not match pattern of laboratory standard.  
 B: Analyte was detected in the associated blank.

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 Updated By: Ted O'Connell 9/1/15, Z. Boutaghou 7/12/2016  
 Checked By: Ted O'Connell 8/29/12  
 Checked By: A. Schroeder 1/13/16  
 Checked By: A. Schroeder 7/14/16

Table 1  
 Summary of Soil Analytical Results  
 Belknap Street (USH 2) Phase 2.5  
 WisDOT ID #8680-00-01 (71)  
 July 2012, December 2014, August 2015, and July 2016

ANALYTE	UNITS	NR 720 RCLs FOR SOIL				B30	B31A	B31B	B31C	B32	B33A	B33B	B33C	B33D	B34	B35A	B35B	B36A	B36B	B36C	B36D	B36E	B36F	B36G
		GW PATH <sup>(1)</sup>	NON-INDUSTRIAL DIRECT CONTACT <sup>(2)</sup>	INDUSTRIAL DIRECT CONTACT <sup>(2)</sup>	BACKGROUND SURFICIAL BTV	3.0-5.0	0.0-2.5	2.5-5.0	7.5-10.0	7.5-10.0	5.0-10.0	5.0-7.0	6.0-8.0	2.5-5.0	2.5-5.0	10.0-11.0	5.0-10.0	5.0-10.0	0.0-5.0	2.5-5	0-2.5	5-7.5	5-7.5	7.5-10
DATE					Jul-12	Jul-12	Jul-12	Aug-15	Jul-12	Jul-12	Jul-12	Jul-12	Aug-15	Jul-12	Jul-12	Jul-12	Jul-12	Jul-12	Dec 2014	Dec 2014	Dec 2014	Dec 2014	Dec 2014	
PID	ppm	--	--	--	--	3.1	3.4	4	<1.0	17.2	3.1	1.2	6.4	5.5	2.6	6.2	5.5	4.3	4.8	<1.0	1.7	<1.0	567.7	1300
GRO	mg/kg	--	--	--	--	<3.6	<3.8	<3.3	<3.5	<3.5	<3.4	<3.5	<3.3	<3.9	<3.5	<3.5	<3.5	<3.5	<3.5	--	--	--	--	--
DRO	mg/kg	--	--	--	--	---	29.2 T4	1.4	<0.84	---	1.3J	1.4J	<1.1	17.7	---	9.5 T4	1.3J	---	---	---	---	---	---	
<b>VOCs/PVOCs<sup>(3)</sup></b>																								
1,2,4-Trimethylbenzene	µg/kg	1,382 <sup>(5)</sup>	89,800	219,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	21,000	6,810
1,3,5-Trimethylbenzene	µg/kg	1,382 <sup>(5)</sup>	182,000	182,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	7,060	3,130
Benzene	µg/kg	5.1	1,490	7,410	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<125	1,040
cis-1,2-Dichloroethene	µg/kg	41.2	156,000	2,040,000	--	---	---	---	---	<25.0	---	---	---	---	<25.0	---	---	---	---	---	---	---	---	---
Ethylbenzene	µg/kg	1,570	7,470	37,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	5,160	3,830
Isopropylbenzene (cumene)	µg/kg	--	268,000	268,000	--	---	---	---	---	<25.0	---	---	---	---	<25.0	---	---	---	---	---	---	---	---	---
m&p-Xylene	µg/kg	3,960 <sup>(4)</sup>	260,000 <sup>(4)</sup>	260,000 <sup>(4)</sup>	--	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	14,800	1,870
Methylene chloride	µg/kg	2.6	60,700	1,070,000	--	---	---	---	---	<25.0	---	---	---	---	<25.0	---	---	---	---	---	---	---	---	---
Methyl-tert-butyl ether (MTBE)	µg/kg	27	59,400	293,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0
Naphthalene	µg/kg	658.2	5,150	26,000	--	<25.0	<25.0	<25.0	<25.0	47.1J	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	1,230 J	78.9
n-Butylbenzene	µg/kg	--	108,000	108,000	--	---	---	---	---	<40.4	---	---	---	---	<40.4	---	---	---	---	---	---	---	---	---
n-Propylbenzene	µg/kg	--	264,000	264,000	--	---	---	---	---	<25.0	---	---	---	---	<25.0	---	---	---	---	---	---	---	---	---
o-Xylene	µg/kg	3,960 <sup>(4)</sup>	260,000 <sup>(4)</sup>	260,000 <sup>(4)</sup>	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	180J	<100
p-Isopropyltoluene	µg/kg	--	162,000	162,000	--	---	---	---	---	<25.0	---	---	---	---	<25.0	---	---	---	---	---	---	---	---	---
sec-Butylbenzene	µg/kg	--	145,000	145,000	--	---	---	---	---	<25.0	---	---	---	---	<25.0	---	---	---	---	---	---	---	---	---
Tetrachloroethene	µg/kg	4.5	30,700	153,000	--	---	---	---	---	<25.0	---	---	---	---	<25.0	---	---	---	---	---	---	---	---	---
Trichloroethene	µg/kg	3.6	1,260	8,810	--	---	---	---	---	<25.0	---	---	---	---	<25.0	---	---	---	---	---	---	---	---	---
Toluene	µg/kg	1,107.20	818,000	818,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<125	<100
<b>Total Metals</b>																								
Arsenic	mg/kg	0.584	0.613	2.39	8	---	---	---	---	4.4	---	---	---	---	4.1	---	---	---	---	---	---	---	---	---
Barium	mg/kg	164.8	15,300	100,000	364	---	---	---	---	269	---	---	---	---	127	---	---	---	---	---	---	---	---	---
Cadmium	mg/kg	0.752	70	799	1	---	---	---	---	<0.035	---	---	---	---	<0.034	---	---	---	---	---	---	---	---	---
Chromium	mg/kg	360,000	--	--	--	---	---	---	---	39.3	---	---	---	---	37.3	---	---	---	---	---	---	---	---	---
Lead	mg/kg	27	400	800	52	9.3	8.4	---	12.3	9	---	8.1	---	45.4	12.2	---	8.6	12.4	---	13.9	11.5	12.2	14.6	11.6
Mercury	mg/kg	0.208	3.13	3.13	--	---	---	---	---	0.015	---	---	---	---	0.018	---	---	---	---	---	---	---	---	---
Selenium	mg/kg	0.52	391	5,110	--	---	---	---	---	<0.54	---	---	---	---	<0.53	---	---	---	---	---	---	---	---	---
Silver	mg/kg	0.85	391	5,110	--	---	---	---	---	0.46J	---	---	---	---	0.53J	---	---	---	---	---	---	---	---	---

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  - RCLs = Residual Contaminant Levels.
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- Footnotes:
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  - Value is the generic RCL for exposure by direct contact.
  - Soil samples collected were analyzed for either PVOCs or the WI LUST 8260 list for VOCs. Only those analytes that were detected are listed. Non-detect results are reported on a wet weight basis.
  - RCL is for total Xylenes
  - RCL is for total Trimethylbenzenes.
- T4: Result reported for hydrocarbons within the method-specific range that do not match pattern of laboratory standard.  
 B: Analyte was detected in the associated blank.

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Table 1  
 Summary of Soil Analytical Results  
 Belknap Street (USH 2) Phase 2.5  
 WisDOT ID #8680-00-01 (71)  
 July 2012, December 2014, August 2015, and July 2016

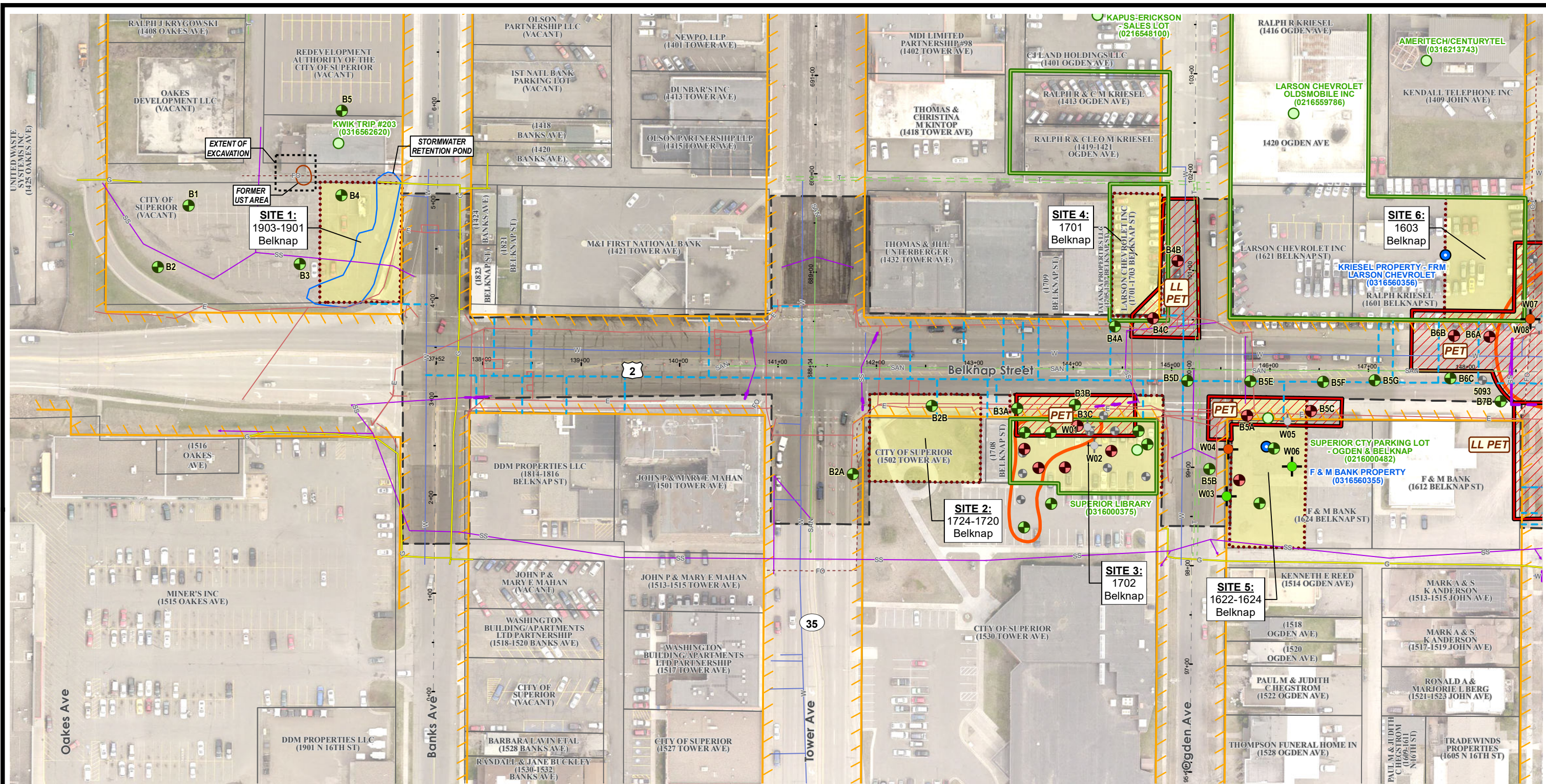
ANALYTE	UNITS	NR 720 RCLs FOR SOIL				B36H	B36I	B36J	B36K	B36L	B36L	B36M	B36M	B36M	B36N	B36N	B36N	B36P	MW-1	MW-1	MW-1
		GW PATH <sup>(1)</sup>	NON-INDUSTRIAL DIRECT CONTACT <sup>(2)</sup>	INDUSTRIAL DIRECT CONTACT <sup>(2)</sup>	BACKGROUND SURFICIAL BTV	5-7.5	2.5-5	2.5-5.0	5.0-7.5	0-2.5	5.0-7.5	2.0-4.0	10-12.5	15-17.5	2.0-4.0	7.5-10.0	22.5-25	8.0-10.0	2.0-4.0	12.5-15	22.5-25
DATE					Dec 2014	Dec 2014	Aug-15	Aug-15	Aug-15	Aug-15	Aug-15	Aug-15	Aug-15	Aug-15	Aug-15	Aug-15	Jul-16	Aug-15	Aug-15	Aug-15	
PID	ppm	--	--	--	--	<1.0	<1.0	<1.0	<1.0	7.7	<1.0	930	1,893	1.9	<1.0	<1.0	<1.0	68.7	23.1	4.9	
GRO	mg/kg	--	--	--	--	---	---	<3.3	---	6.3 J	---	---	610	---	---	---	---	---	---	---	
DRO	mg/kg	--	--	--	--	---	---	<0.85	17.7	236	---	---	41.0	---	---	---	---	---	---	---	
<b>VOCs/PVOCs<sup>(3)</sup></b>																					
1,2,4-Trimethylbenzene	µg/kg	1,382 <sup>(5)</sup>	89,800	219,000	--	<25.0	<25.0	<25.0	<25.0	39.2 J	<25.0	18,100	13,200	<25.0	<25.0	<25.0	<25.0	<25.0	1,840	<25.0	<25.0
1,3,5-Trimethylbenzene	µg/kg	1,382 <sup>(5)</sup>	182,000	182,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	6,070	4,040	<25.0	<25.0	<25.0	<25.0	<25.0	624	<25.0	<25.0
Benzene	µg/kg	5.1	1,490	7,410	--	<25.0	<25.0	<25.0	<25.0	<25.0	<b>2,010</b>	<b>4,240</b>	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0
cis-1,2-Dichloroethene	µg/kg	41.2	156,000	2,040,000	--	---	---	<25.0	<25.0	<25.0	<25.0	<125	<100	<25.0	<25.0	<25.0	<25.0	---	<25.0	<25.0	<25.0
Ethylbenzene	µg/kg	1,570	7,470	37,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	5,670	5,240	<25.0	<25.0	<25.0	<25.0	38.0J	325	<25.0	<25.0
Isopropylbenzene (cumene)	µg/kg	--	268,000	268,000	--	---	---	<25.0	<25.0	<25.0	<25.0	1,910	1,590	<25.0	<25.0	<25.0	<25.0	---	65.7 J	<25.0	<25.0
m&p-Xylene	µg/kg	3,960 <sup>(4)</sup>	260,000 <sup>(4)</sup>	260,000 <sup>(4)</sup>	--	<50.0	<50.0	<50.0	<50.0	<50.0	<50.0	13,500	10,500	<50.0	<50.0	<50.0	<50.0	<50.0	1,450	<50.0	<50.0
Methylene chloride	µg/kg	2.6	60,700	1,070,000	--	---	---	<50.0	<50.0	<50.0	<50.0	<125	<100	<25.0	<25.0	<25.0	<25.0	---	<25.0	<25.0	<25.0
Methyl-tert-butyl ether (MTBE)	µg/kg	27	59,400	293,000	--	---	---	<25.0	<25.0	<25.0	<25.0	<125	<100	<25.0	<25.0	<25.0	<25.0	---	<25.0	<25.0	<25.0
Naphthalene	µg/kg	658.2	5,150	26,000	--	<25.0	<25.0	<40.0	<40.0	63.0 J	<40.0	<b>5,350</b>	<b>3,440</b>	<40.0	<40.0	<40.0	<40.0	<25.0	193 J	<40.0	<40.0
n-Butylbenzene	µg/kg	--	108,000	108,000	--	---	---	<25.0	<25.0	<25.0	<25.0	<125	<100	<25.0	<25.0	<25.0	<25.0	---	226	<25.0	<25.0
n-Propylbenzene	µg/kg	--	264,000	264,000	--	---	---	<25.0	<25.0	<25.0	<25.0	2,890	2,330	<25.0	<25.0	<25.0	<25.0	---	295	<25.0	<25.0
o-Xylene	µg/kg	3,960 <sup>(4)</sup>	260,000 <sup>(4)</sup>	260,000 <sup>(4)</sup>	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	488	399	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0
p-Isopropyltoluene	µg/kg	--	162,000	162,000	--	---	---	<25.0	<25.0	<25.0	<25.0	1,770	1,240	<25.0	<25.0	<25.0	<25.0	---	33.9 J	<25.0	<25.0
sec-Butylbenzene	µg/kg	--	145,000	145,000	--	---	---	<25.0	<25.0	<25.0	<25.0	699	573	<25.0	<25.0	<25.0	<25.0	---	59.3 J	<25.0	<25.0
Tetrachloroethene	µg/kg	4.5	30,700	153,000	--	---	---	<25.0	<25.0	<25.0	<25.0	<125	<100	<25.0	<25.0	<25.0	<25.0	---	<25.0	<25.0	<25.0
Trichloroethene	µg/kg	3.6	1,260	8,810	--	---	---	<25.0	<25.0	<25.0	<25.0	<125	<100	<25.0	<25.0	<25.0	<25.0	---	<25.0	<25.0	<25.0
Toluene	µg/kg	1,107.20	818,000	818,000	--	<25.0	<25.0	<25.0	<25.0	<25.0	<25.0	<125	<100	<25.0	<25.0	<25.0	<25.0	<25.0	36.5 J	<25.0	<25.0
<b>Total Metals</b>																					
Arsenic	mg/kg	0.584	0.613	2.39	8	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Barium	mg/kg	164.8	15,300	100,000	364	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Cadmium	mg/kg	0.752	70	799	1	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Chromium	mg/kg	360,000	--	--	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Lead	mg/kg	27	400	800	52	11.8	10.9	11.8	10.4	34.7	--	12.9	11.8	8.5	9.3	--	--	--	26.1	14.1	14.4
Mercury	mg/kg	0.208	3.13	3.13	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Selenium	mg/kg	0.52	391	5,110	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Silver	mg/kg	0.85	391	5,110	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

- Notes:
- PID = Photoionization Detector
  - J = Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.
  - '---' = Not analyzed
  - RCLs = Residual Contaminant Levels.
  - '--' = Suggested RCL has not been established for this analyte
  - Bold** = indicates that the analyte and/or sample exceeds the NR 720 RCL for direct contact (non-industrial or industrial), or standards for hazard index or cancer risk unless value is less than BTV.
  - Italics* = indicates that the sample exceeds the groundwater pathway RCL.

- Footnotes:
- Value is the generic RCL for the groundwater pathway.
  - Value is the generic RCL for exposure by direct contact.
  - Soil samples collected were analyzed for either PVOCs or the WI LUST 8260 list for VOCs. Only those analytes that were detected are listed. Non-detect results are reported on a wet weight basis.
  - RCL is for total Xylenes
  - RCL is for total Trimethylbenzenes.
- T4: Result reported for hydrocarbons within the method-specific range that do not match pattern of laboratory standard.  
 B: Analyte was detected in the associated blank.

Created By: Wesley Braga 8/15/12  
 Updated By: Ted O'Connell 9/1/15, Z. Boutaghou 7/12/2016  
 Checked By: Ted O'Connell 8/29/12  
 Checked By: A. Schroeder 1/13/16  
 Checked By: A. Schroeder 7/14/16



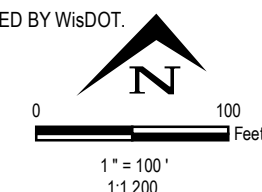


**LEGEND**

- MONITORING WELL LOCATION-NO VOC/PVOC DETECTION
  - MONITORING WELL LOCATION-VOC/PVOC DETECTION
  - SOIL BORING LOCATION-NO VOC/PVOC DETECTION
  - SOIL BORING LOCATION-VOC/PVOC DETECTION
  - MONITORING WELL LOCATION-(NO DATA)
  - SOIL BORING LOCATION-(NO DATA)
  - CLOSED BRRTS SITE
  - OPEN BRRTS SITE
- 
- PHASE I SITES
  - PETROLEUM
  - DRY CLEANER
  - WOODWORKING
  - APPROXIMATE EXTENT OF IMPACTS IN SOIL IDENTIFIED BY OTHERS (CURRENT AND REMOVED)
  - ESTIMATED EXTENTS OF SOIL CONTAMINATION IN CONSTRUCTION AREAS
  - APPROXIMATE HISTORIC STREAM
  - APPROXIMATE PROJECT LIMITS
  - PROPERTY BOUNDARY
- 
- PROPOSED UTILITIES
  - PROPOSED STORM SEWER
  - PROPOSED WATER LINES
  - EXISTING UTILITIES
  - STORM SEWER
  - SANITARY SEWER
  - UNDERGROUND ELECTRIC
  - UNDERGROUND FIBER OPTIC
  - UNDERGROUND GAS
  - UNDERGROUND TELECOM
  - UNDERGROUND WATER
  - RIGHT-OF-WAY BOUNDARY

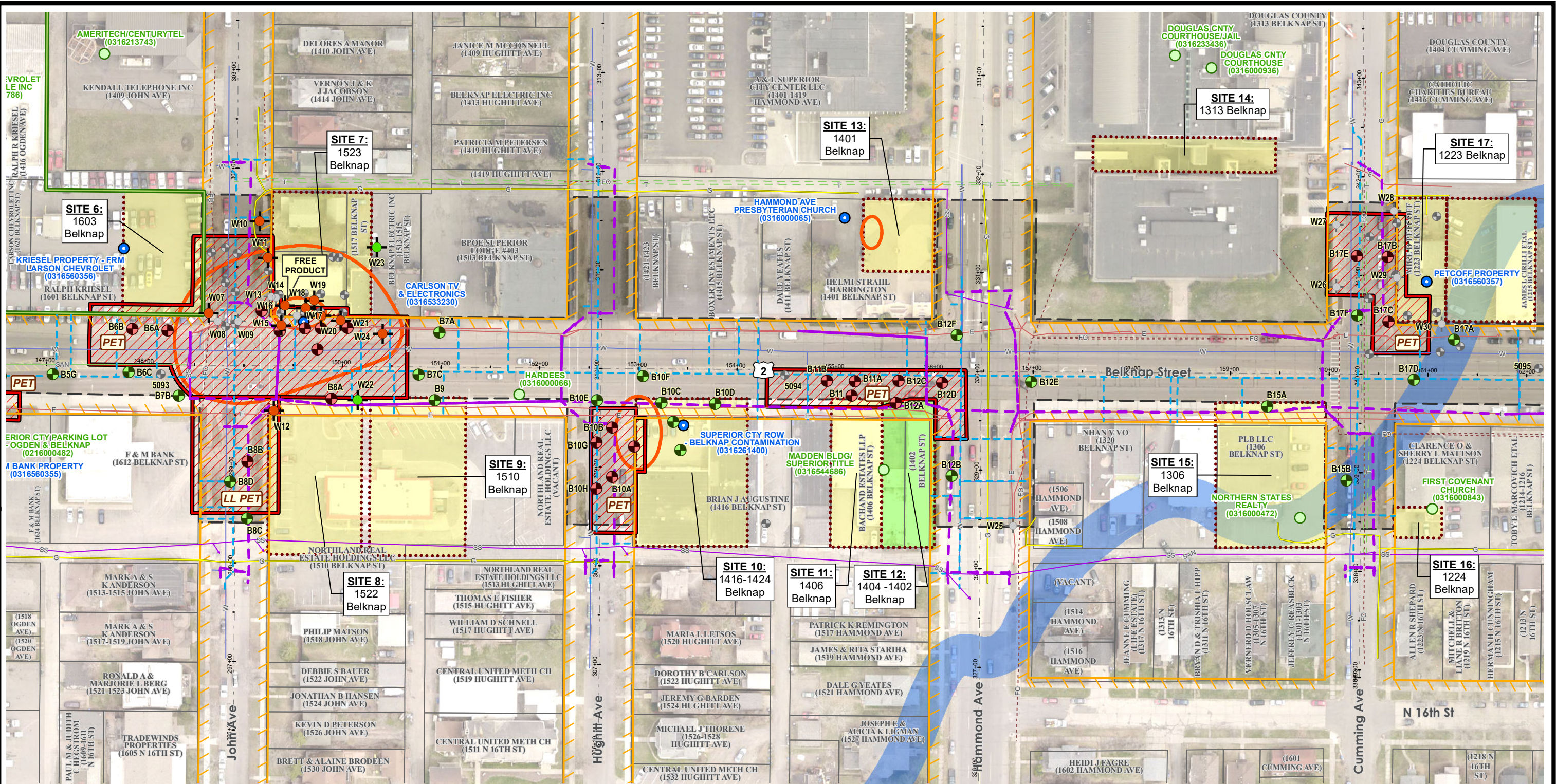
**NOTES**

1. BASE MAP IMAGERY FROM WisDOT.
2. PARCEL BOUNDARIES, RIGHT-OF-WAY BOUNDARIES, STORM SEWER LINES, AND SANITARY SEWER LINES PROVIDED BY CITY OF SUPERIOR GIS DEPARTMENT.
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 "CHL" = CHLORINATED IMPACT



PROJECT:		<b>USH 2 (BELKNAP STREET)</b>	
		<b>WISDOT ID# 8680-00-01</b>	
		<b>SUPERIOR, WISCONSIN</b>	
SHEET TITLE:			
<b>FIGURE 1</b>			
<b>SITE LAYOUT AND AREAS OF VOC/PVOC CONTAMINATION</b>			
DRAWN BY:	RHODE B	SCALE:	PROJ. NO.
CHECKED BY:	BOUTAGHOU Z	1:1,200	238003
APPROVED BY:	HAAK D	DATE PRINTED:	FILE NO.
DATE:	JULY 2016		238003-009_mb.mxd
			<b>MAP PAGE 1 OF 6</b>
		708 Heartland Trail, Suite 3000 Madison, WI 53717 Phone: 608.826.3600 www.trcsolutions.com	



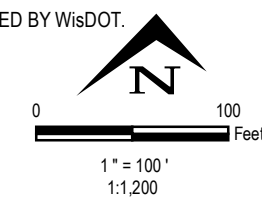


**LEGEND**

- MONITORING WELL LOCATION- NO VOC/PVOC DETECTION
  - MONITORING WELL LOCATION- VOC/PVOC DETECTION
  - SOIL BORING LOCATION- NO VOC/PVOC DETECTION
  - SOIL BORING LOCATION- VOC/PVOC DETECTION
  - MONITORING WELL LOCATION- (NO DATA)
  - SOIL BORING LOCATION- (NO DATA)
  - CLOSED BRRTS SITE
  - OPEN BRRTS SITE
- PHASE I SITES
  - PETROLEUM
  - DRY CLEANER
  - WOODWORKING
  - APPROXIMATE EXTENT OF IMPACTS IN SOIL IDENTIFIED BY OTHERS (CURRENT AND REMOVED)
  - ESTIMATED EXTENTS OF SOIL CONTAMINATION IN CONSTRUCTION AREAS
  - APPROXIMATE HISTORIC STREAM
  - APPROXIMATE PROJECT LIMITS
  - PROPERTY BOUNDARY
- PROPOSED UTILITIES
  - PROPOSED STORM SEWER
  - PROPOSED WATER LINES
  - EXISTING UTILITIES
  - STORM SEWER
  - SANITARY SEWER
  - UNDERGROUND ELECTRIC
  - UNDERGROUND FIBER OPTIC
  - UNDERGROUND GAS
  - UNDERGROUND TELECOM
  - UNDERGROUND WATER
  - RIGHT-OF-WAY BOUNDARY

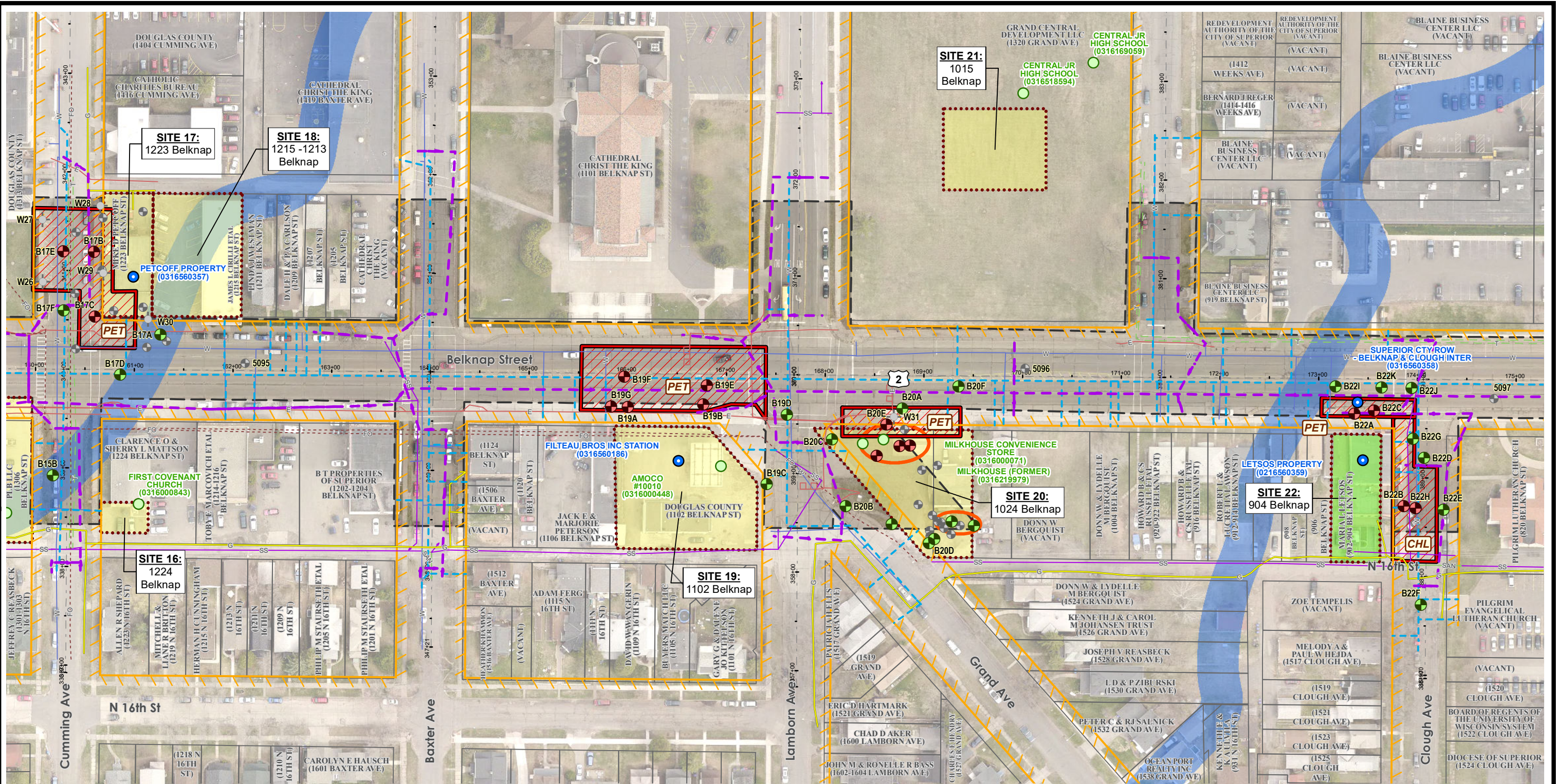
**NOTES**

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2. PARCEL BOUNDARIES, RIGHT-OF-WAY BOUNDARIES, STORM SEWER LINES, AND SANITARY SEWER LINES PROVIDED BY CITY OF SUPERIOR GIS DEPARTMENT.
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PROJECT:		<b>USH 2 (BELKNAP STREET)</b>	
		<b>WISDOT ID# 8680-00-01</b>	
		<b>SUPERIOR, WISCONSIN</b>	
SHEET TITLE:			
<b>FIGURE 1</b>			
<b>SITE LAYOUT AND AREAS OF VOC/PVOC CONTAMINATION</b>			
DRAWN BY:	RHODE B	SCALE:	238003
CHECKED BY:	BOUTAGHOU Z	1:1,200	FILE NO. 238003-009_mh.mxd
APPROVED BY:	HAAK D	DATE PRINTED:	
DATE:	JULY 2016		
<b>MAP PAGE 2 OF 6</b>			
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**LEGEND**

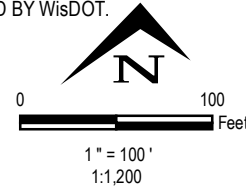
- MONITORING WELL LOCATION- NO VOC/PVOC DETECTION
  - MONITORING WELL LOCATION- VOC/PVOC DETECTION
  - SOIL BORING LOCATION- NO VOC/PVOC DETECTION
  - SOIL BORING LOCATION- VOC/PVOC DETECTION
  - MONITORING WELL LOCATION- (NO DATA)
  - SOIL BORING LOCATION- (NO DATA)
  - CLOSED BRRTS SITE
  - OPEN BRRTS SITE
- PHASE I SITES
  - PETROLEUM
  - DRY CLEANER
  - WOODWORKING
  - APPROXIMATE EXTENT OF IMPACTS IN SOIL IDENTIFIED BY OTHERS (CURRENT AND REMOVED)
  - ESTIMATED EXTENTS OF SOIL CONTAMINATION IN CONSTRUCTION AREAS
  - APPROXIMATE HISTORIC STREAM
  - APPROXIMATE PROJECT LIMITS
  - PROPERTY BOUNDARY

**PROPOSED UTILITIES**

- PROPOSED STORM SEWER
  - PROPOSED WATER LINES
- EXISTING UTILITIES**
- STORM SEWER
  - SANITARY SEWER
  - UNDERGROUND ELECTRIC
  - UNDERGROUND FIBER OPTIC
  - UNDERGROUND GAS
  - UNDERGROUND TELECOM
  - UNDERGROUND WATER
  - RIGHT-OF-WAY BOUNDARY

**NOTES**

1. BASE MAP IMAGERY FROM WisDOT.
2. PARCEL BOUNDARIES, RIGHT-OF-WAY BOUNDARIES, STORM SEWER LINES, AND SANITARY SEWER LINES PROVIDED BY CITY OF SUPERIOR GIS DEPARTMENT.
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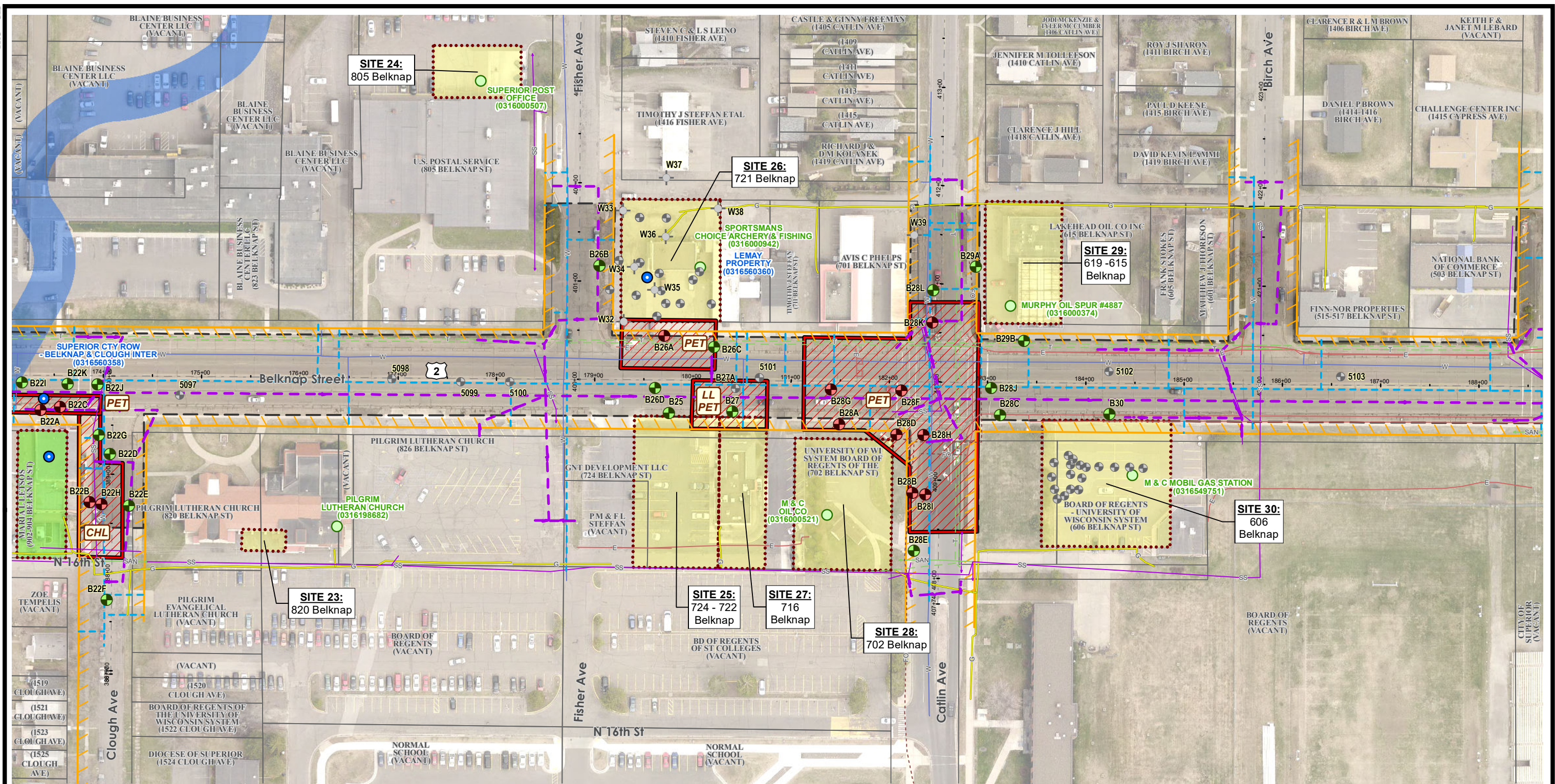
PROJECT: **USH 2 (BELKNAP STREET)**  
**WISDOT ID# 8680-00-01**  
**SUPERIOR, WISCONSIN**

SHEET TITLE: **FIGURE 1**  
**SITE LAYOUT AND AREAS OF VOC/PVOC CONTAMINATION**

DRAWN BY: RHODE B	SCALE: 1:1,200	PROJ. NO. 238003
CHECKED BY: BOUTAGHOU Z	DATE PRINTED:	FILE NO. 238003-009_mb.mxd
APPROVED BY: HAAK D	<b>MAP PAGE 3 OF 6</b>	
DATE: JULY 2016		

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 Madison, WI 53717  
 Phone: 608.826.3600  
 www.trcsolutions.com





### LEGEND

<ul style="list-style-type: none"> <li> MONITORING WELL LOCATION- NO VOC/PVOC DETECTION</li> <li> MONITORING WELL LOCATION- VOC/PVOC DETECTION</li> <li> SOIL BORING LOCATION- NO VOC/PVOC DETECTION</li> <li> SOIL BORING LOCATION- VOC/PVOC DETECTION</li> <li> MONITORING WELL LOCATION- (NO DATA)</li> <li> SOIL BORING LOCATION- (NO DATA)</li> <li> CLOSED BRRTS SITE</li> <li> OPEN BRRTS SITE</li> </ul>	<h4>PHASE I SITES</h4> <ul style="list-style-type: none"> <li> PETROLEUM</li> <li> DRY CLEANER</li> <li> WOODWORKING</li> <li> APPROXIMATE EXTENT OF IMPACTS IN SOIL IDENTIFIED BY OTHERS (CURRENT AND REMOVED)</li> <li> ESTIMATED EXTENTS OF SOIL CONTAMINATION IN CONSTRUCTION AREAS</li> <li> APPROXIMATE HISTORIC STREAM</li> <li> APPROXIMATE PROJECT LIMITS</li> <li> PROPERTY BOUNDARY</li> </ul>	<h4>PROPOSED UTILITIES</h4> <ul style="list-style-type: none"> <li> PROPOSED STORM SEWER</li> <li> PROPOSED WATER LINES</li> </ul> <h4>EXISTING UTILITIES</h4> <ul style="list-style-type: none"> <li> STORM SEWER</li> <li> SANITARY SEWER</li> <li> UNDERGROUND ELECTRIC</li> <li> UNDERGROUND FIBER OPTIC</li> <li> UNDERGROUND GAS</li> <li> UNDERGROUND TELECOM</li> <li> UNDERGROUND WATER</li> <li> RIGHT-OF-WAY BOUNDARY</li> </ul>
--	---	---

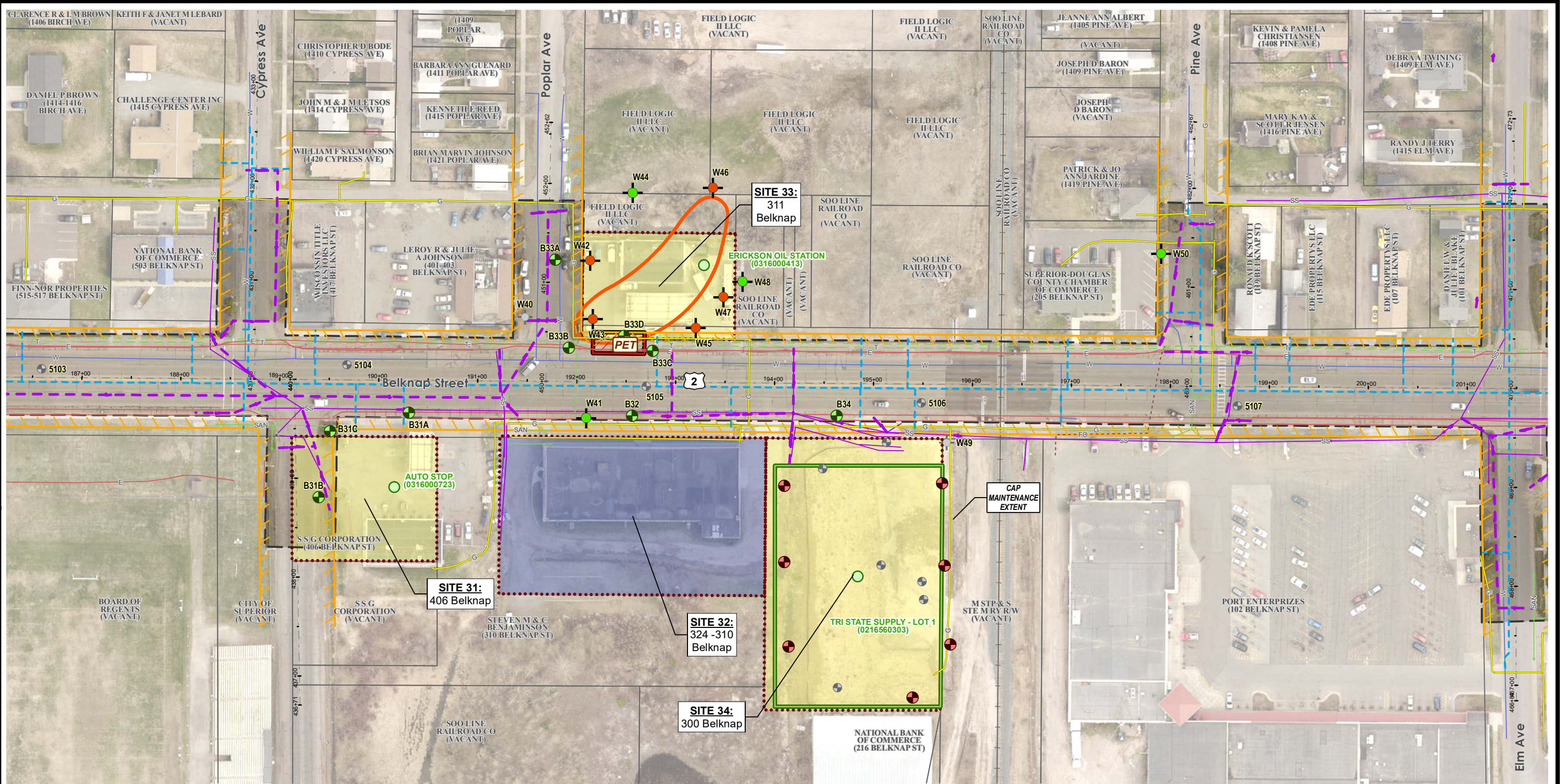
### NOTES

- BASE MAP IMAGERY FROM WisDOT.
- PARCEL BOUNDARIES, RIGHT-OF-WAY BOUNDARIES, STORM SEWER LINES, AND SANITARY SEWER LINES PROVIDED BY CITY OF SUPERIOR GIS DEPARTMENT.
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0 100 Feet  
 1" = 100'  
 1:1,200

PROJECT: <b>USH 2 (BELKNAP STREET)</b>		WISDOT ID# 8680-00-01	
SUPERIOR, WISCONSIN			
SHEET TITLE: <b>FIGURE 1</b>			
<b>SITE LAYOUT AND AREAS OF VOC/PVOC CONTAMINATION</b>			
DRAWN BY: RHODE B	SCALE: 1:1,200	PROJ. NO. 238003	
CHECKED BY: BOUTAGHOU Z		FILE NO. 238003-009_mb.mxd	
APPROVED BY: HAAK D	DATE PRINTED:		
DATE: JULY 2016			
<b>MAP PAGE 4 OF 6</b>			
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**LEGEND**

	MONITORING WELL LOCATION- NO VOC/PVOC DETECTION		PHASE I SITES
	MONITORING WELL LOCATION- VOC/PVOC DETECTION		PETROLEUM
	SOIL BORING LOCATION- NO VOC/PVOC DETECTION		DRY CLEANER
	SOIL BORING LOCATION- VOC/PVOC DETECTION		WOODWORKING
	MONITORING WELL LOCATION- (NO DATA)		APPROXIMATE EXTENT OF IMPACTS IN SOIL IDENTIFIED BY OTHERS (CURRENT AND REMOVED)
	SOIL BORING LOCATION- (NO DATA)		ESTIMATED EXTENTS OF SOIL CONTAMINATION IN CONSTRUCTION AREAS
	CLOSED BRRTS SITE		APPROXIMATE HISTORIC STREAM
	OPEN BRRTS SITE		APPROXIMATE PROJECT LIMITS
			PROPERTY BOUNDARY

**PROPOSED UTILITIES**

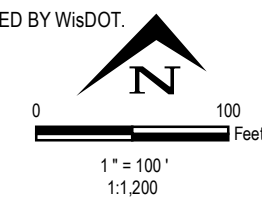
- PROPOSED STORM SEWER
- PROPOSED WATER LINES

**EXISTING UTILITIES**


- STORM SEWER
- SANITARY SEWER
- UNDERGROUND ELECTRIC
- UNDERGROUND FIBER OPTIC
- UNDERGROUND GAS
- UNDERGROUND TELECOM
- UNDERGROUND WATER
- RIGHT-OF-WAY BOUNDARY

**NOTES**

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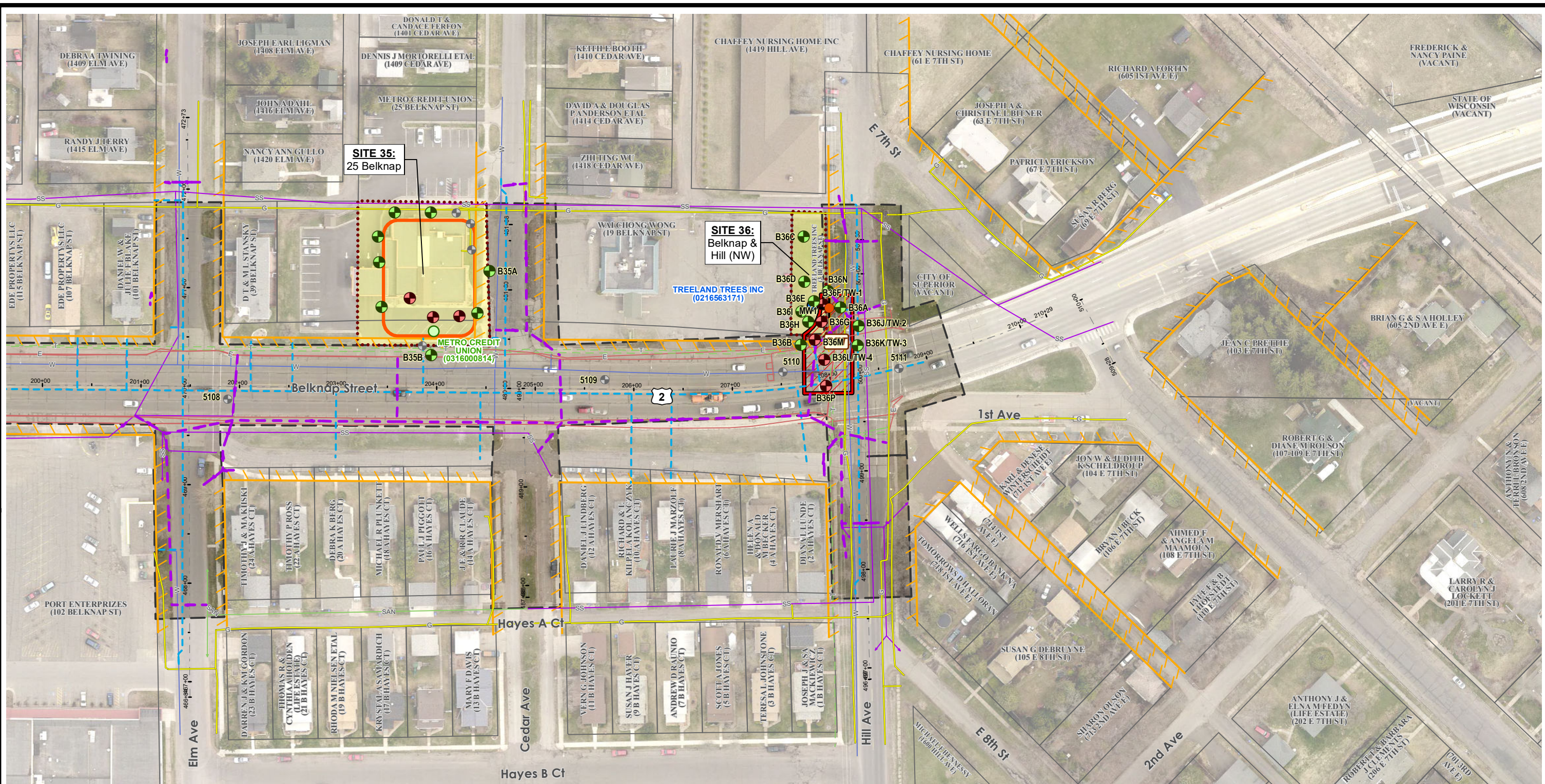


PROJECT: <b>USH 2 (BELKNAP STREET)</b>		WISDOT ID# 8680-00-01	
SUPERIOR, WISCONSIN			
SHEET TITLE: <b>FIGURE 1</b>			
<b>SITE LAYOUT AND AREAS OF VOC/PVOC CONTAMINATION</b>			
DRAWN BY: RHODE B	SCALE: 1:1,200	PROJ. NO. 238003	
CHECKED BY: BOUTAGHOU Z		FILE NO. 238003-009_mb.mxd	
APPROVED BY: HAAK D	DATE PRINTED:		
DATE: JULY 2016			
<b>MAP PAGE 5 OF 6</b>			



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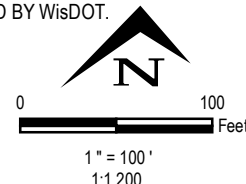


**LEGEND**

	MONITORING WELL LOCATION- NO VOC/PVOC DETECTION		PHASE I SITES		PROPOSED UTILITIES
	MONITORING WELL LOCATION- VOC/PVOC DETECTION		PETROLEUM		PROPOSED STORM SEWER
	SOIL BORING LOCATION- NO VOC/PVOC DETECTION		DRY CLEANER		PROPOSED WATER LINES
	SOIL BORING LOCATION- VOC/PVOC DETECTION		WOODWORKING		EXISTING UTILITIES
	SOIL BORING LOCATION- VOC/PVOC DETECTION		APPROXIMATE EXTENT OF IMPACTS IN SOIL IDENTIFIED BY OTHERS (CURRENT AND REMOVED)		STORM SEWER
	MONITORING WELL LOCATION- (NO DATA)		ESTIMATED EXTENTS OF SOIL CONTAMINATION IN CONSTRUCTION AREAS		SANITARY SEWER
	SOIL BORING LOCATION- (NO DATA)		APPROXIMATE HISTORIC STREAM		UNDERGROUND ELECTRIC
	CLOSED BRRTS SITE		APPROXIMATE PROJECT LIMITS		UNDERGROUND FIBER OPTIC
	OPEN BRRTS SITE		PROPERTY BOUNDARY		UNDERGROUND GAS
					UNDERGROUND TELECOM
					UNDERGROUND WATER
					RIGHT-OF-WAY BOUNDARY

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PROJECT:		<b>USH 2 (BELKNAP STREET)</b>	
		<b>WISDOT ID# 8680-00-01</b>	
		<b>SUPERIOR, WISCONSIN</b>	
SHEET TITLE:			
<b>FIGURE 1</b>			
<b>SITE LAYOUT AND AREAS OF VOC/PVOC CONTAMINATION</b>			
DRAWN BY:	RHODE B	SCALE:	PROJ. NO.
CHECKED BY:	BOUTAGHOU Z	1:1,200	238003
APPROVED BY:	HAAK D	DATE PRINTED:	FILE NO.
DATE:	JULY 2016		238003-009_mb.mxd
			<b>MAP PAGE 6 OF 6</b>
		708 Heartland Trail, Suite 3000 Madison, WI 53717 Phone: 608.826.3600 www.trcsolutions.com	



**Attachment 1**  
**Special Provisions**

**Special Provisions**

**Table of Contents**

<b>Article</b>	<b>Description</b>	<b>Page #</b>
16.	Notice to Contractor – Protection of Groundwater Monitoring Wells. ....	2
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## SPECIAL PROVISIONS

### 16. Notice to Contractor – Protection of Groundwater Monitoring Wells.

Groundwater monitoring wells, including lost or improperly abandoned wells, may be present within the construction limits. Notify the environmental consultant when groundwater monitoring wells are encountered. Protect all wells to maintain their integrity. Adjust wells that do not conflict with utilities, structures, curb and gutter, etc. to be flush with the final grade. For wells that have been adjusted, survey the elevation of the top of casing as directed by the environmental consultant. For wells that conflict with the previously mentioned items, notify the environmental consultant, and coordinate with the environmental consultant, or for wells that require abandonment, the abandonment or adjustment of the wells by others. The environmental consultant will provide maps indicating the locations of all known monitoring wells, if requested by the contractor.

Coordinate with the environmental consultant to ensure that the environmental consultant is present to document the location of the groundwater monitoring wells during excavation activities.

Coordinate work under this Contract with the environmental consultant retained by the department:

Consultant: TRC Environmental Corporation  
Contact: Mr. Dan Haak  
Address: 708 Heartland Trail, Suite 3000, Madison, WI 53717  
Phone: (608) 826-3628  
Fax: (608) 826-3941  
e-mail: [dhaak@trcsolutions.com](mailto:dhaak@trcsolutions.com)

Work shall be incidental to Excavation, Hauling, and Disposal of ~~Petroleum~~-Contaminated Soil.

### 17. Notice to Contractor – Contamination Removed By Others During Construction.

The department and others completed testing for soil and ground water contamination for locations within this project where excavation is required. Testing indicated that contaminated soil is present at the following site(s): ~~Carlson TV & Electronics~~:

- Site 6 and 7 (Carlson TV & Electronics) – on Belknap Street at Station 147+40 to 148+25 from the reference line to the project limits on the left, and from 148+25 to 150+75 within the project limits, and on John Avenue at Station 299+75 to 301+75 within in the project limits. (from 5-13 feet bgs)

The contaminated soils at the above sites that are within the ~~excavation~~ limits of this project ~~will~~may be removed by others concurrent with the work under this project.

Supply the schedule of operations in the contaminated area to the engineer at the preconstruction conference. The department will coordinate the remediation activities by others.

Provide the engineer with a written notice at least ten (10) calendar days prior to the schedule date of beginning work in the contaminated areas.

Initial contractor work in contaminated areas prior to the start of remediation activities by others shall be limited to removal of sidewalks, curb and gutter, and pavement. Then, suspend work operations in contaminated areas to allow remediation activities by others. The remediation activities of contaminated soil excavation is estimated to take five (5) calendar days to complete. Contaminated soils are likely to remain within the excavation limits of this project and shall managed in accordance with Excavation, Hauling, and Disposal of Contaminated Soil.

The Hazardous Materials Report is available by contacting Dan Haak, TRC, (608) 826-3628, dhaak@trcsolutions.com.  
107-110 (20030820)

## **21. Health and Safety Requirements for Workers Remediating Petroleum Contamination.**

*Add the following to standard spec 107.1(2):*

Soil contamination with gasoline, diesel fuel, fuel oil, or other petroleum related products may be encountered during excavation activities. Prepare a site specific Health and Safety Plan complying with the Occupational Safety and Health Administration (OSHA) standard for Hazardous Waste Operation and Emergency Response (HAZWOPER), 29 CFR 1910.120.

All site workers taking part in remediation activities or who will have the reasonable probability of exposure of safety or health hazards associated with the hazardous material shall have completed Health and Safety training that meets OSHA requirements. Prior to the start of remediation work, submit to the engineer a site specific Health and Safety Plan, and written verification that workers will have completed up-to-date OSHA training.

Develop, delineate, and enforce the health and safety exclusions zones for each contaminated site location pursuant to 29 CFR 1910.120.  
107-115 (20150630)

**36. Excavation, Hauling, and Disposal of ~~Petroleum~~-Contaminated Soil, Item 205.0501.S.01**

**A Description**

**A.1 General**

This special provision describes excavating, loading, hauling, and disposing of contaminated soil at a licensed bioremediation and landfill facility. The closest licensed facilities are:

Superior City Moccasin Mike Landfill  
Moccasin Mike Road  
Superior, WI 54880

Veit USA Landfill  
1100 West Gary Street  
Duluth, MN 55808

Waste Management Timberline Trail RDF  
N4581 Hutchinson Road  
Stubbs TN, WI 54819

Perform this work in accordance to standard spec 205 and with pertinent parts of Chapters NR 700-754 of the Wisconsin Administrative Code, as supplemented herein. Per NR 718.07, a solid waste collection and transportation service-operating license is required under NR 502.06 for each vehicle used to transport contaminated soil.

**A.2 Notice to the Contractor – Contaminated Soil and Groundwater Location(s)**

The department and others completed testing for soil and groundwater contamination for locations within this project where excavation is required. Testing indicated that petroleum-contaminated soil and groundwater is present at the following location(s) as shown on the plans:

- Site 3 – on Belknap Street at Station 143+40 to 144+60 from 30 feet right of the reference line to the project limits on the right (from 0-7.0 feet bgs)
- Site 4 - on Belknap Street at Station 144+55 to 145+30 from 30 feet left of the reference line to the project limits on the left, and on Ogden Avenue at Station 100+30 to 101+75 from the reference line to the project limits on the left. (from 5-7.5 feet bgs)
- Site 5 - on Belknap Street at Station 145+40 to 146+75 from 30 feet right of the reference line to the project limits on the right, and on Ogden Avenue at Station 99+25 to 100+0099+75 from approximately 15 feet right of reference line to the project limits to the right. (from 0-13 feet bgs)



- Site 6 and 7 – on Belknap Street at Station 147+40 to 148+25 from the reference line to the project limits on the left, and from 148+25 to 150+75 within the project limits, and on John Avenue at Station 299+75 to 301+75 within in the project limits. (from 5-13 feet bgs)
- Site 8 - on John Avenue at Station 298+50 to 299+75 with in the project limits. (from 1-5 feet bgs)
- Site 10 – on Hughitt Avenue at Station 308+25 to ~~310+00~~309+50 from the reference line to the project limits on the right (from 2.5-10 feet bgs)
- Sites 11 and 12 – on Belknap Street at Station 154+~~90~~25 to 156+~~00~~40 from the reference line to the project limits to the right, and on Hammond Avenue at Station 329+30 to 330+00 from approximately 5 feet left of the reference line to the project limits left. (from 10-13 feet bgs)
- Site 17 – on Belknap Street at Station 160+~~25~~40 to 161+00 from approximately 20 feet left of the reference line to the project limits on the left, and on Cumming Avenue at Station 340+~~00~~75 to 341+75 from the ~~reference line~~project limits on the left to the project limits on the right. (from 2-13 feet bgs)
- Site 19 – on Belknap Street at Station ~~166+00~~165+50 to 167+45 from approximately 20 feet left of the reference line to the project limits on the right. (from 2.5-10 feet bgs)
- Site 20 – on Belknap Street at Station 168+15 to 169+40 from 30 feet right of the reference line to the project limits on the right (from 0-7 feet bgs)
- Site 22 – on Belknap Street at Station 173+00 to 174+00 from approximately 15 feet right of the reference line to the project limits on the right. (from 0-13 feet bgs)
- Site 26 – on Belknap Street at Station 179+25 to 180+25 from approximately 10 feet left of the reference line to the project limits on the left. (from 0-12 feet bgs)
- Site 27 - on Belknap Street at Station 180+00 to 180+75 from the reference line to the project limits on the right. (from 1-5 feet bgs)
- Site 28 - on Belknap Street at Station 181+10 to ~~182+50~~1832+090 from the ~~reference line~~project limits on the left to the project limits on the right, and on Catlin Avenue at Station 408+50 to 410+~~00~~75 from the ~~reference line~~project limits on the left to the project limits on the ~~left~~right. (from 1-13 feet bgs)
- Site 33 – on Belknap Street at Station 192+10 to 192+70 from 30 feet left of the reference line to the project limits on the left (from 0-5 feet bgs)

- Site 36 – on Belknap Street at Station 207+75 to 208+~~520~~ from approximately 15 feet right of the reference line to the project limits on the left, and on Hill Avenue at Station ~~500+00499+75~~ to 500+75 from the reference line to the project limits on the left. (various depths)

In addition, results indicate that solvent-contaminated soil and groundwater is present at the following location as shown on the plans:

- Clough Avenue at Station 388+~~50-0015~~ to 389+75 from approximately 15 feet right of the reference line to the project limits to the left. (from 3-10 feet bgs)

Potential underground storage tanks (USTs) may be present at the following locations:

- At Site 22, extending from Station 173+25 to 173+50, located in the sidewalk adjacent from 902-904 Belknap Street.

- ~~▪ (DBD per WisDOT GPR investigation)~~

Assist the environmental consultant in determining if USTs are present at these locations, by performing backhoe pit investigations as directed by the environmental consultant. The backhoe pit investigation should be performed as soon as practical after sidewalks, curb and gutter, and pavement are removed and prior to utility construction beginning in those areas. The backhoe pit investigation shall be limited to areas of potential USTs and shall include up to 3 test pits per location, to a maximum depth of 6 feet bgs. The test pit investigations shall be incidental to this pay item.

There is a potential that contaminated soil and/or underground storage tanks (USTs) may be encountered at other locations within the construction limits. If contaminated soil and/or USTs are encountered at other locations, terminate excavations in this area and notify the engineer. Contaminated soil at other locations will be managed by contractor under this contract and USTs will be removed by others.

If contaminated soils are encountered elsewhere on the project, terminate excavation activities in the area and notify the engineer.

The excavation management plan for this project has been designed to minimize the offsite disposal of contaminated material. The excavation management plan, including these special provisions, has been developed in cooperation with the WDNR. The WDNR concurrence letter is on file at the Wisconsin Department of Transportation. For further information regarding previous investigation and remediation activities at these sites contact:

Name: Mr. Dan Haak or Mr. Ted O'Connell  
Address: 708 Heartland Trail, Madison, WI 53717  
Phone: 608-826-3628 or 608-826-3648  
Fax: 608-826-3941  
E-mail: [dhaak@trcsolutions.com](mailto:dhaak@trcsolutions.com) or [toconnell@trcsolutions.com](mailto:toconnell@trcsolutions.com)

### **A.3 Coordination**

Coordinate work under this contract with the environmental consultant:

Consultant: TRC Environmental Corporation  
Address: 708 Heartland Trail, Madison, WI 53717  
Contact: Mr. Dan Haak or Mr. Ted O'Connell  
Phone: 608-826-3628 or 608-826-3648  
Fax: 608-826-3941  
E-mail: [dhaak@trcsolutions.com](mailto:dhaak@trcsolutions.com) or [toconnell@trcsolutions.com](mailto:toconnell@trcsolutions.com)

The role of the environmental consultant will be limited to:

1. Determining if USTs are present at the pre-determined locations by assisting contractor in performing backhoe test pits;
2. Determining the location and limits of contaminated soil to be excavated based on soil analytical results from previous investigations, visual observations, and field screening of soil that is excavated;
3. Identifying contaminated soils to be hauled to the landfill facility;
4. Documenting that activities associated with management of contaminated soil are in conformance with the contaminated soil management methods for this project as specified herein; and
5. Obtaining the necessary approvals for disposal of contaminated soil from the landfill facility.

Provide at least a 14-calendar day notice of the preconstruction conference date to the environmental consultant. At the preconstruction conference, provide a schedule for all excavation activities in the areas of contamination to the environmental consultant. Also notify the environmental consultant at least three calendar days prior to commencement of excavation activities in each of the contaminated areas.

Coordinate with the environmental consultant to ensure that the environmental consultant is present during excavation activities in the contaminated areas. Perform excavation work in each of the contaminated areas on a continuous basis until excavation work is completed.

Identify the licensed landfill facility that will be used for disposal of contaminated soils, and provide this information to the environmental consultant no later than 30 calendar days prior to commencement of excavation activities in the contaminated areas or at the preconstruction conference, whichever comes first. The environmental consultant will be responsible for obtaining the necessary approvals from the landfill facility for disposal of contaminated soils. Do not transport contaminated soil offsite without prior approval from the environmental consultant.

### **A.4 Health and Safety Requirements**

*Supplement standard spec 107.1 with the following:*

During excavation activities, expect to encounter soil contaminated with gasoline, diesel fuel, fuel oil, or other petroleum related products, and solvents. Site workers taking part in activities that will result in the reasonable probability of exposure to safety and health hazards associated with hazardous materials shall have completed health and safety training that meets the Occupational Safety and Health Administration (OSHA) requirements for Hazardous Waste Operations and Emergency Response (HAZWOPER), as provided in 29 CFR 1910.120.

Prepare a site-specific Health and Safety Plan, and develop, delineate and enforce the health and safety exclusion zones for each contaminated site location as required by 29 CFR 1910.120. Submit the site-specific health and safety plan and written documentation of up-to-date OSHA training to the engineer prior to the start of work.

## **B (Vacant)**

### **C Construction**

*Supplement standard spec 205.3 with the following:*

Control operations in the contaminated areas to minimize the quantity of contaminated soil excavated.

The environmental consultant will periodically evaluate soil excavated from the contaminated areas to determine if the soil will require offsite disposal. The environmental consultant will evaluate excavated soil based on field screening results, visual observations, and soil analytical results from previous environmental investigations. Assist the environmental consultant in collecting soil samples for evaluation using excavation equipment. The sampling frequency shall be a maximum of one sample for every 20 cubic yards excavated.

On the basis of the results of such field-screening, the material will be designated for disposal as follows:

- Excavation Common – clean soil, construction and demolition fill (such as clean soil, boulders, concrete, reinforced concrete, bituminous pavement, bricks, building stone, unpainted or untreated wood), which under NR 500.08 are exempt materials.
- Low-level contaminated material, which exhibits no odors, staining, or PID readings no greater than 10 ppm, for reuse as fill within the construction limits, or
- Petroleum-contaminated soil for bioremediation at the licensed disposal facility, or
- Solvent-contaminated soil for disposal at the licensed disposal facility, or

- Potentially contaminated for temporary stockpiling and additional characterization prior to disposal.

If during excavations outside the areas of known contamination, materials are encountered that exhibit characteristics of municipal wastes or contain significant quantities of industrial-type wastes, such as fly ash, foundry sand, and cinders, or when conditions such as underground storage tanks or soil/fill material with noticeable impacts from petroleum or chemical products, or other obvious potentially contaminated materials are encountered, suspend excavation in that area and notify the engineer and the environmental consultant.

Some material may require additional characterization prior to disposal. Provide for the temporary stockpiling of up to 200 cubic yards of contaminated soil on-site that require additional characterization. Construct and maintain a temporary stockpile of the material in accordance with NR 718.05(3), including, but not limited to, placement of the contaminated soil/fill material on an impervious surface and covering the stockpile with material to prevent infiltration of precipitation. Provide barrier fence around the stockpile as directed by the engineer and in accordance with Fence Safety. The Department's environmental consultant will collect representative samples of the stockpiled material, laboratory-analyze the samples, and advise the contractor, within 10 business days of the construction of the stockpile, of disposal requirements. The stockpiled material shall be disposed either at the licensed disposal facility by contractor or if characterized as a hazardous wastes, by the Department. As an alternative to temporarily stockpiling contaminated soil/fill material that requires additional characterization, the contractor has the option of suspending excavation in those areas where such soil is encountered until such time as characterization is completed.

Directly load and haul soils designated by the environmental consultant for offsite disposal to the licensed landfill facility. Use loading and hauling practices that are appropriate to prevent any spills or releases of contaminated soils or residues. Prior to transport, sufficiently dewater soils designated for off-site disposal so as not to contain free liquids.

~~Safety fencing will be implemented for the temporary stockpile location per Section 616.0700.S Fence Safety.~~

When dewatering of groundwater is required or surface water infiltrates excavations in areas of known contamination, either discharge to the sanitary sewer with the City of Superior approval (contact Tammy Tang, Safety & Pretreatment Coordinator, 715-394-0392), treat water per WDNR requirements and then discharged on-site, or temporarily store on-site, haul, and dispose of water by a licensed waste hauler.

Such water may be discharged to surface water if it meets all applicable requirements of the Wisconsin Pollution Discharge Elimination System (WPDES) for petroleum-contaminated groundwater. Perform all necessary monitoring to document compliance with WPDES requirements. Furnish, install, operate, maintain, disassemble, and remove treatment equipment necessary to comply with WPDES requirements.

Ensure continuous dewatering and excavation safety at all times. Provide, operate, and maintain adequate pumping equipment and drainage and disposal facilities. Notify the engineer of any dewatering activities, and obtain any permits necessary to discharge water. Provide copies of such permits to the engineer. Meet any requirements and pay any costs for obtaining and complying with such permit use. Follow all applicable legislative statutes, judiciary decisions, and regulations of the State of Wisconsin.

The City of Superior will be the generator of regulated solid waste from this construction project.

**D Measurement**

The department will measure Excavation, Hauling, and Disposal of Contaminated Soil in tons of contaminated soil accepted by the landfill facility as documented by weight tickets generated by the landfill facility.

**E Payment**

The department will pay for measured quantities at the contract unit price under the following bid item:

ITEM NUMBER	DESCRIPTION	UNIT
205.0501.S.01	Excavation, Hauling, and Disposal of Contaminated Soil	Ton

Payment is full compensation for excavating, segregating, loading, hauling, and direct landfilling or treatment via bioremediation of contaminated soil; tipping fees including any applicable taxes and surcharges; obtaining solid waste collection and transportation service operating licenses; assisting in the collection soil samples for field evaluation; and dewatering of soils prior to transport, if necessary and for furnishing all labor, tools, equipment, and incidentals necessary to complete the work. No additional payment will be made for tipping fees associated with the disposal of contaminated soil.  
205-003 (20080902)

**37. Over Excavation, Hauling, and Disposal of Contaminated Soil, Item 205.0501.S.02**

**A Description**

**A.1 General**

This special provision describes the over-excavation of contaminated soil, backfilling and compacting the excavation, loading, hauling, and disposing of contaminated soil at a licensed bioremediation and landfill facility. The closest licensed facilities are:

Superior City Moccasin Mike Landfill  
Moccasin Mike Road  
Superior, WI 54880



Veit USA Landfill  
1100 West Gary Street  
Duluth, MN 55808

Waste Management Timberline Trail RDF  
N4581 Hutchinson Road  
Stubbs TN, WI 54819

Perform this work in accordance to standard spec 205 and with pertinent parts of Chapters NR 700-754 of the Wisconsin Administrative Code, as supplemented herein. Per NR 718.07, a solid waste collection and transportation service-operating license is required under NR 502.06 for each vehicle used to transport contaminated soil.

### **A.2 Notice to the Contractor – Contaminated Soil Location(s)**

The department and others completed testing for soil and groundwater contamination for locations within this project where excavation is required. Testing indicated that contaminated soil is present at the following location(s) as shown on the plans:

Treeland Trees and other City sites

- Site 10 – on Hughitt Avenue at Station 308+25 to ~~310+00~~309+50 from the reference line to the project limits on the right (from 2.5-10 feet bgs)
- Site 22 – on Belknap Street at Station 173+00 to 174+00 from approximately 15 feet right of the reference line to the project limits on the right. (from 0-13 feet bgs)
- Site 36 – on Belknap Street at Station 207+75 to 208+50 from approximately 15 feet right of the reference line to the project limits on the left, and on Hill Avenue at Station ~~500+00~~499+75 to 500+75 from the reference line to the project limits on the left. (various depths)

The excavation management plan for this project has been designed to minimize the offsite disposal of contaminated material. The excavation management plan, including these special provisions, has been developed in cooperation with the WDNR. The WDNR concurrence letter is on file at the Wisconsin Department of Transportation. For further information regarding previous investigation and remediation activities at these sites contact:

Name: Mr. Dan Haak or Mr. Ted O’Connell  
Address: 708 Heartland Trail, Madison, WI 53717  
Phone: 608-826-3628 or 608-826-3648  
Fax: 608-826-3941  
E-mail: [dhaak@trcsolutions.com](mailto:dhaak@trcsolutions.com) or [toconnell@trcsolutions.com](mailto:toconnell@trcsolutions.com)

### **A.3 Coordination**

Coordinate work under this contract with the environment consultant:

Consultant: TRC Environmental Corporation  
Address: 708 Heartland Trail, Madison, WI 53717  
Contact: Mr. Dan Haak or Mr. Ted O'Connell  
Phone: 608-826-3628 or 608-826-3648  
Fax: 608-826-3941  
E-mail: [dhaak@trcsolutions.com](mailto:dhaak@trcsolutions.com) or [toconnell@trcsolutions.com](mailto:toconnell@trcsolutions.com)

The role of the environmental consultant will be limited to:

1. Determining the location and limits of contaminated soil to be excavated based on soil analytical results from previous investigations, visual observations, and field screening of soil that is excavated;
2. Identifying contaminated soils to be hauled to the landfill facility;
3. Documenting that activities associated with management of contaminated soil are in conformance with the contaminated soil management methods for this project as specified herein; and
4. Obtaining the necessary approvals for disposal of contaminated soil from the landfill facility.

Provide at least a 14-calendar day notice of the preconstruction conference date to the environmental consultant. At the preconstruction conference, provide a schedule for all excavation activities in the areas of contamination to the environmental consultant. Also notify the environmental consultant at least three calendar days prior to commencement of excavation activities in each of the contaminated areas.

Coordinate with the environmental consultant to ensure that the environmental consultant is present during excavation activities in the contaminated areas. Perform excavation work in each of the contaminated areas on a continuous basis until excavation work is completed.

Identify the licensed landfill facility that will be used for disposal of contaminated soils, and provide this information to the environmental consultant no later than 30 calendar days prior to commencement of excavation activities in the contaminated areas or at the preconstruction conference, whichever comes first. The environmental consultant will be responsible for obtaining the necessary approvals from the landfill facility for disposal of contaminated soils. Do not transport contaminated soil offsite without prior approval from the environmental consultant.

#### **A.4 Health and Safety Requirements**

*Supplement standard spec 107.1 with the following:*

During excavation activities, expect to encounter soil contaminated with gasoline, diesel fuel, fuel oil, or other petroleum related products, and solvents. Site workers taking part in activities that will result in the reasonable probability of exposure to safety and health hazards associated with hazardous materials shall have completed health and safety training

that meets the Occupational Safety and Health Administration (OSHA) requirements for Hazardous Waste Operations and Emergency Response (HAZWOPER), as provided in 29 CFR 1910.120.

Prepare a site-specific Health and Safety Plan, and develop, delineate and enforce the health and safety exclusion zones for each contaminated site location as required by 29 CFR 1910.120. Submit the site-specific health and safety plan and written documentation of up-to-date OSHA training to the engineer prior to the start of work.

## **B (Vacant)**

## **C Construction**

*Supplement standard spec 205.3 with the following:*

Control operations in the contaminated areas to minimize the quantity of contaminated soil excavated.

The environmental consultant will periodically evaluate soil excavated from the contaminated areas to determine if the soil will require offsite disposal. The environmental consultant will evaluate excavated soil based on field screening results, visual observations, and soil analytical results from previous environmental investigations. Assist the environmental consultant in collecting soil samples for evaluation using excavation equipment. The sampling frequency shall be a maximum of one sample for every 20 cubic yards excavated.

On the basis of the results of such field-screening, the material will be designated for disposal as follows:

- Excavation Common – clean soil, construction and demolition fill (such as clean soil, boulders, concrete, reinforced concrete, bituminous pavement, bricks, building stone, unpainted or untreated wood), which under NR 500.08 are exempt materials.
- Low-level contaminated material for reuse as fill within the construction limits, or
- Petroleum-contaminated soil for bioremediation at the licensed disposal facility, or
- Solvent-contaminated soil for disposal at the licensed disposal facility, or
- Potentially contaminated for temporary stockpiling and additional characterization prior to disposal.

Directly load and haul soils designated by the environmental consultant for offsite disposal to the licensed landfill facility. Use loading and hauling practices that are appropriate to prevent any spills or releases of contaminated soils or residues. Prior to transport, sufficiently dewater soils designated for off-site disposal so as not to contain free liquids.

The City of Superior will be the generator of regulated solid waste from this construction project.

**D Measurement**

The department will measure Excavation, Hauling, and Disposal of Contaminated Soil in tons of contaminated soil accepted by the landfill facility as documented by weight tickets generated by the landfill facility.

**E Payment**

The department will pay for measured quantities at the contract unit price under the following bid item:

ITEM NUMBER	DESCRIPTION	UNIT
205.0501.S.02	Excavation, Hauling, and Disposal of Contaminated Soil	Ton

Payment is full compensation for excavating, segregating, loading, hauling, and direct landfilling or treatment via bioremediation of contaminated soil; tipping fees including any applicable taxes and surcharges; obtaining solid waste collection and transportation service operating licenses; assisting in the collection soil samples for field evaluation; backfilling and compacting the excavation; and dewatering of soils prior to transport, if necessary and for furnishing all labor, tools, equipment, and incidentals necessary to complete the work. No additional payment will be made for tipping fees associated with the disposal of contaminated soil.

205-003 (20080902)

**95. Low Permeable Plug, Item SPV 0060.39**

**A Description**

This special provision describes work conforming with the requirements of section 205 of the standard specifications, pertinent parts of the Wisconsin Administration Code (Department of Natural Resources Environmental Investigation and Remediation of Environmental Contamination, Chapters NR 700-736), as shown on the plans, and as supplemented herein.

This work consists of construction of low permeable plugs within utility trenches, including quality assurance testing, if required by the engineer or environmental consultant.

**A.1 Notice to the Contractor**

The department and others have completed investigations for soil and groundwater contamination for locations adjacent to, and within, the construction limits where excavation is planned. Information obtained by the department indicates that installation of low permeable plugs are required to reduce the potential for migration of contaminants within new utility trenches entering and/or exiting the following contaminated soil management locations:

- Site 7 – on Belknap Street at Station 149+35 at 25 feet from the reference line to the left, and on John Avenue at 300+65 at 5 feet from the reference line to the right.

Additional low permeable plugs may be required for utility trenches at other locations at the discretion of the engineer and environmental consultant. For further information regarding investigation activities at these locations, contact Dan Haak, TRC Environmental Corporation, 708 Heartland Trail, Madison, Wisconsin, 53717, and (608) 826-3628.

## **A.2 Coordination**

Coordinate work under this contract with the environment consultant retained by the department:

Consultant: TRC Environmental Corporation  
Contact: Mr. Dan Haak  
Address: 708 Heartland Trail, Suite 3000, Madison, WI 53717  
Phone: (608) 826-3628  
Fax: (608) 826-3941  
e-mail: [dhaak@trcsolutions.com](mailto:dhaak@trcsolutions.com)

The role of the environmental consultant will be limited to:

1. Evaluation and approval of alternate low permeable plug construction (if alternate to section B is proposed by contractor); and
2. Determining the location and installation depths of low permeable plugs based on review of information from previous field investigations, visual observations, and field screening of soil and groundwater.

Construct low permeable plugs in accordance with the terms and conditions specified herein. At the pre-construction conference, provide a proposed schedule for all excavation activities in the areas of known contamination. Three calendar days prior to commencement of low permeable plug construction, notify the engineer and environmental consultant and provide specifications for alternate low permeable plugs, if proposed. Coordinate with the environmental consultant to ensure that the consultant is present prior to and during low permeable plug construction.

Provide documentation of conformance to the bentonite, cement, aggregate, and sand specifications identified in B Materials to engineer at least three days prior to low permeable plug construction.

## **B Materials**

Furnish the materials required to mix and construct the low permeable plug. Acquire materials used for the low permeable plug mixture from the same source used for all work. Use the following low permeable plug mixture unless an alternative low permeable plug is approved by the department and environmental consultant:

- (1) No. 1 Stone: Gradation in accordance with department's Concrete Coarse Aggregate, Section 501.2.5.4.4, No.1.

SIEVE SIZE	PERCENT PASSING
1 inch	100

¾-inch	90 – 100
3/8-inch	20 – 55
No. 4	0 – 10
No. 8	0 – 5

(2) Sand: Natural river or bank sand; free of silt, clay, loam, friable or soluble materials, or organic matter; graded in accordance with WisDOT Concrete Fine Aggregate Section 501.2.5.3.4 within the following limits:

SIEVE SIZE	PERCENT PASSING
3/8-inch	100
No. 4	90 – 100
No. 16	45 – 80
No. 50	5 – 30
No. 100	0 – 10

(3) Cement: ASTM C 150, Type I – Normal

(4) Bentonite: High yield 200-mesh sodium bentonite clay.

(5) Water: Use pre-approved department source. Water shall be clean and not detrimental to concrete.

Prepare the low permeable plug in general accordance with the following: one 50-pound bag of cement, two 50-pound bags of sodium bentonite, 1,280 pounds of sand, and 1,939 pounds of No. 1 stone per 1 CY of mix. Prepare the mixture to have sufficient water to be free-flowing and self-healing with a slump of 8 to 10 inches. Use form material at your discretion.

### **C Construction**

Supplement subsection 205.3 of the standard specification with the following:

Examine the following items prior to the low permeable plug construction to verify materials to be used are acceptable: confirm trench subgrade and walls meet specifications, and confirm trench subgrade is free of standing water.

Erect formwork, shoring, and bracing to achieve design requirements in accordance with requirements of ACI 301. Provide bracing to ensure stability of formwork. Shore or strengthen formwork subject to overstressing by construction loads. The trench backfill placed at the angle of repose in completed sections of the utility trench may serve as containment for one face of the low permeable trench plug.

Extend each low permeable plug at least 3 feet along the trench length. Extend the height of each plug from the bottom of the design utility trench to at least 1 foot above the installed utility. Completely encase the utility pipes and extend the low permeable plugs from trench sidewall to trench sidewall. Place materials such that materials do not segregate. Maintain

records of material placement (e.g., record data, location, quantity, air temperature, and test samples collected).

Remove the formwork in accordance with requirements of ACI 301. Remove the forms after 48 hours or when the low permeable material has achieved a strength of at least 50 pounds per square inch as measured by unconfined compressive strength tests on the test specimens. If low permeable plug material does not have the strength to maintain its shape without the assistance of forms, allow the forms to remain in-place.

Field inspection and testing will be performed by the department as necessary. Assist the department with obtaining material samples. The department representative may perform tests on bentonite, cement, aggregate, and sand to ensure conformance with specified requirements. If field inspections indicate work does not meet specified requirements, remove work and replace at no additional cost to the department.

**D Measurement**

The department will measure Low Permeable Plugs in quantity of plugs placed and accepted.

**E Payment**

The department will pay for measured quantities at the contract unit price under the following bid item:

ITEM NUMBER	DESCRIPTION	UNIT
SPV.0060.39	Low Permeable Plug	Each

Payment is full compensation for furnishing all materials and formwork, preparing the low permeable plug, hauling materials to the construction site, placing the material, removing formwork, and for furnishing all labor, tools, equipment, and incidentals necessary to complete the work.

~~116. Trench Plug, Item SPV.0060.83.~~

~~A Description~~

~~This special provision describes \_\_\_\_\_.~~

~~B Materials~~

~~Furnish \_\_\_\_\_ conforming to standard spec section #. \_\_\_\_\_~~

~~C Construction~~

~~\_\_\_\_\_~~

~~D Measurement~~

~~The department will measure \_\_\_\_\_~~

~~E Payment~~

~~The department will pay for measured quantities at the contract unit price under the following bid item:~~

<del>ITEM NUMBER</del>	<del>DESCRIPTION</del>	<del>UNIT</del>
<del>SPV.0060.83</del>	<del>Trench Plug</del>	<del>EACH</del>

~~Payment is full compensation for~~ \_\_\_\_\_

## **167. Management of Solid Waste, Item SPV.0195.01.**

### **A Description**

This work will conform with the requirements of Section 205 of the Standard Specifications; to pertinent parts of the Wisconsin Administrative Code, Chapters NR 700-736 Environmental Investigation and Remediation of Environmental Contamination; Wisconsin Administration Code, Chapters NR 500-538, Solid Waste; and as shown on the plans and as supplemented herein.

Contaminated waste material excavated during construction which cannot in the opinion of the environmental consultant be managed as contaminated soil will be managed as solid waste. Solid waste within fill material may be encountered within the limits of the construction.

This work consists of excavating, segregating, temporary stockpiling, loading, hauling, and disposing of solid waste material at a licensed disposal facility. The nearest licensed disposal facilities are:

Superior City Moccasin Mike Landfill  
Moccasin Mike Road  
Superior, WI 54880

Veit USA Landfill  
1100 West Gary Street  
Duluth, MN 55808

Waste Management Timberline Trail RDF  
N4581 Hutchinson Road  
Stubbs TN, WI 54819

Provide information to the environmental consultant and engineer that indicates the licensed disposal facility that the contractor will use.

### **B (Vacant)**

### **C Construction**

Subsection 205.3 of the Standard Specification is supplemented with the following:

Solid waste is defined as material containing non-exempt materials such as treated wood, household waste, glass, plastic, or similar wastes not exempt from licensing and



requirements of Wisconsin Administrative Code NR 500–538 of the solid waste regulations. Dispose of all such material at an approved solid waste disposal facility.

During excavations in the area of known contamination, larger chunks of clean concrete (~2 cubic feet) and bricks will be segregated from the fill, to the extent practical and managed as common excavation. Under NR 500.08 this material is exempt from licensing and requirements of Wisconsin Administrative Code NR 500-538 of the solid waste regulations, and will be reused as designated by the environmental consultant or engineer as fill on the project, or it will be disposed of off-site at the contractor’s disposal site(s).

Verify that the vehicles used to transport material are licensed for such activity in accordance with applicable state and federal regulations.

Obtain the necessary disposal facility approvals and DNR approvals for disposal. Do not transport regulated solid waste off-site without obtaining the approval of the environmental consultant and engineer and notifying the disposal facility.

The City of Superior will be the generator of regulated solid waste from this construction project.

**D Measurement**

The department will measure solid waste by the ton of waste accepted by the disposal facility and as documented by weight tickets.

**E Payment**

The department will pay for measured quantities at the contract unit price under the following item:

ITEM NUMBER	DESCRIPTION	UNIT
SPV.0195.01	Management of Solid Waste	Ton

This payment for Management of Solid Waste is full payment for excavating, segregating, temporary stockpiling, loading, transporting, and disposal of solid waste material and for furnishing all labor, tools, equipment, and incidentals necessary to complete the work in accordance with the contract. No additional payment will be made for tipping fees associated with the disposal of solid waste.

## **Attachment 2**

### **Soil Boring Logs and Borehole Abandonment Forms**

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B10E</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/6/2016</b>		Date Drilling Completed <b>7/6/2016</b>	
Drilling Method <b>Geoprobe</b>						
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL	Surface Elevation Feet MSL	Borehole Diameter <b>2.1 inches</b>	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,596 N, 1,441,968 E S/C(N)</b>			Lat <b>46° 43' 13.97"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	
1/4 of Section , T N, R			Long <b>-92° 5' 58.071"</b>			
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	U S C S	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 48		1	<b>CONCRETE</b>											
				<b>SUBBASE, sand and gravel.</b>											
2 GP	60 60		2	<b>LEAN CLAY (CL), plastic, 5YR 5/4 reddish brown, no odor, no moisture, very stiff.</b>	CL			0.0	2.4						
			3					0.0	2.8						
			4												
			5												
			6												
			7												
			8												
			9												
			10	<b>E.O.B. at 10' bgs.</b>											

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

Signature Firm **TRC Environmental** Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B10F</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/6/2016</b>		Date Drilling Completed <b>7/6/2016</b>	
Drilling Method <b>Geoprobe</b>						
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL	Surface Elevation Feet MSL	Borehole Diameter <b>2.1 inches</b>	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,618 N, 1,442,015 E S/C(N)</b>			Lat <b>46° 43' 14.207"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	
1/4 of Section , T N, R			Long <b>-92° 5' 57.403"</b>			
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 48		1	<b>CONCRETE</b>											
				<b>SUBBASE, sand and gravel.</b>											
2 GP	60 54		2	<b>LEAN CLAY (CL), plastic, 5YR 5/4 reddish brown, no odor, no moisture, very stiff.</b>	CL			0.1	3.1						
			3					0.1	3.6						
			6					<1	3.8						
			8					<1	2.75						
			10	<b>E.O.B. at 10' bgs.</b>											

Soil sample from 8.0' - 10.0' bgs.

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

Signature Firm **TRC Environmental** Tel: \_\_\_\_\_ Fax: \_\_\_\_\_


This form is authorized by Chapters 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats. Completion of this form is mandatory. Failure to file this form may result in 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 this form is not intended to be used for any other purpose. NOTE: See instructions for more information, including where the completed form should be sent.

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>		License/Permit/Monitoring Number		Boring Number <b>B10G</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/6/2016</b>	Date Drilling Completed <b>7/6/2016</b>	Drilling Method <b>Geoprobe</b>
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL	Surface Elevation Feet MSL	Borehole Diameter <b>2.1 inches</b>
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,553 N, 1,441,966 E S/C(N)</b> 1/4 of _____ 1/4 of Section _____, T _____ N, R _____			Local Grid Location Lat <b>46° 43' 13.546"</b> <input type="checkbox"/> N <input type="checkbox"/> E Long <b>-92° 5' 58.081"</b> Feet <input type="checkbox"/> S Feet <input type="checkbox"/> W		
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>	

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200	
1 GP	60 54		1	<b>CONCRETE</b>										
				<b>SUBBASE, sand and gravel.</b>										
2 GP	60 60		2	<b>LEAN CLAY (CL)</b> , plastic, 5YR 5/4 reddish brown, no odor, no moisture, very stiff, slight mottling.					2.8					
			3											
			4	As above, petroleum odor beginning at 3.5' bgs.										
			5	As above, strong petroleum odor over 5' to 10' interval.	CL									
			6						823	3.0				
			7											
			8											
			9											
			10	E.O.B. at 10' bgs.				728	2.2				Soil sample from 8.0' - 10.0' bgs.	

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

Signature  Firm **TRC Environmental** Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>		License/Permit/Monitoring Number		Boring Number <b>B10H</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/6/2016</b>	Date Drilling Completed <b>7/6/2016</b>	Drilling Method <b>Geoprobe</b>
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL	Surface Elevation Feet MSL	Borehole Diameter <b>2.1 inches</b>
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,506 N, 1,441,965 E S/C(N)</b>			Local Grid Location		
1/4 of Section , T N, R			Lat <b>46° 43' 13.086"</b>	<input type="checkbox"/> N <input type="checkbox"/> E	
			Long <b>-92° 5' 58.078"</b>	<input type="checkbox"/> S <input type="checkbox"/> W	
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>	

Sample	Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
										Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1	GP	60 60		1	<b>CONCRETE</b>											
				1	<b>SUBBASE, sand and gravel.</b>											
				2	<b>LEAN CLAY (CL), plastic, 5YR 4/4 reddish brown, slight petroleum odor, no moisture, very stiff to hard; petroleum odor increases with depth; breaks blocky.</b>				3.4	3.1						
				3					423	4.2						
				4												
2	GP	60 60		5	As above.	CL										
				6					487	3.0						
				7												
				8	As above, very strong petroleum odor from 8' to 10' bgs.				920	3.2						Soil sample from 8.0' - 10.0' bgs.
				9												
				10	E.O.B. at 10' bgs.											

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

Signature	Firm <b>TRC Environmental</b>	Tel: Fax:
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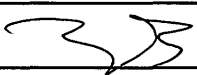


Route To: Watershed/Wastewater  Waste Management   
Remediation/Redevelopment  Other

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B11A</b>		
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/6/2016</b>		Date Drilling Completed <b>7/6/2016</b>		
WI Unique Well No.			DNR Well ID No.		Common Well Name		
Final Static Water Level Feet MSL			Surface Elevation Feet MSL		Borehole Diameter <b>2.1 inches</b>		
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,608 N, 1,442,229 E S/C(N)</b>			Lat <b>46° 43' 14.164"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W		
1/4 of Section , T N, R			Long <b>-92° 5' 54.324"</b>		Feet <input type="checkbox"/> S <input type="checkbox"/> W		
Facility ID		County <b>Douglas</b>		County Code <b>16</b>		Civil Town/City/ or Village <b>Superior</b>	

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments		
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200			
1 GP	60 9		1	<b>CONCRETE</b>												
				<b>SUBBASE, sand and gravel.</b>												
2 GP	60 60		2	<b>LEAN CLAY (CL), plastic, 5YR 4/4 reddish brown, slight petroleum odor, no moisture, very stiff.</b>				0.0	2.5							
			3	As above.	CL											
			4													
			5													
			6													
			7													
			8													
			9													
10	<b>E.O.B. at 10' bgs.</b>															

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

Signature  Firm **TRC Environmental** Tel: Fax:

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B11B</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/6/2016</b>		Date Drilling Completed <b>7/6/2016</b>	
Drilling Method <b>Geoprobe</b>			Final Static Water Level <b>Feet MSL</b>		Surface Elevation <b>Feet MSL</b>	
WI Unique Well No.		DNR Well ID No.		Common Well Name		Borehole Diameter <b>2.1 inches</b>
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,610 N, 1,442,201 E S/C/Ⓝ</b>			Lat <b>46° 43' 14.17"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	
1/4 of Section , T N, R			Long <b>-92° 5' 54.729"</b>			
Facility ID		County <b>Douglas</b>		County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>	

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200	
1 GP	60 36		1	<b>CONCRETE</b>										
			1	<b>SUBBASE, sand and gravel.</b>				<1	1.6					
2 GP	60 60		2	<b>LEAN CLAY (CL), plastic, 5YR 4/4 reddish brown, no odor, no moisture, stiff.</b>	CL			4.2	3.5					
			5					As above, very stiff.		3.3				
			6						18.3	3.2				
			7											
			8						6.7	2.75				
			9											
			10											
										E.O.B. at 10' bgs.				

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

Signature Firm **TRC Environmental** Tel: Fax:

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B12C</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/6/2016</b>		Date Drilling Completed <b>7/6/2016</b>	
Drilling Method <b>Geoprobe</b>						
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL		Surface Elevation Feet MSL	
					Borehole Diameter <b>2.1 inches</b>	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/>			Local Grid Location			
State Plane <b>573,608 N, 1,442,274 E S/C/N</b>			Lat <b>46° 43' 14.17"</b>			<input type="checkbox"/> N <input type="checkbox"/> E
1/4 of <b>T</b> N, R			Long <b>-92° 5' 53.686"</b>			<input type="checkbox"/> S <input type="checkbox"/> W
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200	
1 GP	60 30		1	<b>CONCRETE</b>										
			1	<b>SUBBASE, sand and gravel.</b>										
2 GP	60 9		2	<b>SANDY LEAN CLAY (CL), plastic, 5YR 4/4 reddish brown, no odor, no moisture, very stiff.</b>				0.2	3.2					
			3					1.6	2.4					
			4											
			5	As above, very little (9") recovery on 5' - 10' bgs interval; very soft.	CL									
			6						3.4	0.0				
			7											
			8											
			9											
			10	E.O.B. at 10' bgs.										

Soil sample from 8.0' - 10.0' bgs.

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

Signature	Firm <b>TRC Environmental</b>	Tel: Fax:
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This form is authorized by Chapters 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats. Completion of this form is mandatory. Failure to file this form may result in 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 this form is not intended to be used for any other purpose. NOTE: See instructions for more information, including where the completed form should be sent.

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B12D</b>		
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/6/2016</b>		Date Drilling Completed <b>7/6/2016</b>		
WI Unique Well No.			DNR Well ID No.		Common Well Name		
Final Static Water Level <b>Feet MSL</b>			Surface Elevation <b>Feet MSL</b>		Borehole Diameter <b>2.1 inches</b>		
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,605 N, 1,442,317 E S/C/N</b>			Lat <b>46° 43' 14.152"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W		
1/4 of Section , T N, R			Long <b>-92° 5' 53.055"</b>				
Facility ID		County <b>Douglas</b>		County Code <b>16</b>		Civil Town/City/ or Village <b>Superior</b>	

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 60		1	<b>CONCRETE</b>											
			1	<b>SUBBASE</b> , sand and gravel; black staining.				<1	3.3						
			2	<b>SANDY LEAN CLAY (CL)</b> , medium to fine grained sand, plastic, 5YR 4/4 reddish brown, slight petroleum odor, no moisture, very stiff; grades from sandy to no sand over 1' to 4' bgs interval.	CL			6.3	2.5						
			4	<b>LEAN CLAY (CL)</b> , plastic, 5YR 4/4 reddish brown, slight petroleum odor, moist, very stiff; wetter and fatter with depth; water trapped between sample sleeve and soil sample.				29	2.6						
2 GP	60 60		5												
			6												
			7		CL										
			8					38.7	2.0						
			9												
			10	<b>E.O.B. at 10' bgs.</b>											Soil sample from 8.0' - 10.0' bgs.

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

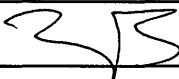
Signature Firm **TRC Environmental** Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B12E</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>	
Drilling Method <b>Geoprobe</b>						
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL	Surface Elevation Feet MSL	Borehole Diameter <b>2.1 inches</b>	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,603 N, 1,442,408 E S/C(N)</b>			Lat <b>46° 43' 14.162"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	
1/4 of Section , T N, R			Long <b>-92° 5' 51.756"</b>			
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200	
1 GP	60 54		1	<b>CONCRETE</b>										
				<b>SUBBASE, sand and gravel.</b>										
2 GP	60 60		2	<b>LEAN CLAY (CL), plastic, 5YR 4/6 reddish brown, no odor, no moisture, very stiff.</b>				<1	2.75					
			3					<1	3.5					
			5	<b>As above, with mottles (gley 2 7/10G light blueish grey) throughout 5' to 10' bgs interval.</b>	CL			<1	3.25					
			8					<1	2.75			Soil sample from 8.0' - 10.0' bgs.		
			10	<b>E.O.B. at 10' bgs.</b>										

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

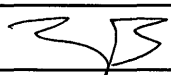
Signature  Firm **TRC Environmental** Tel: Fax:

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B12F</b>		
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>		
WI Unique Well No.			DNR Well ID No.		Common Well Name		
Final Static Water Level <b>Feet MSL</b>			Surface Elevation <b>Feet MSL</b>		Borehole Diameter <b>2.1 inches</b>		
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,652 N, 1,442,334 E S/C(N)</b>			Lat <b>46° 43' 14.625"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W		
1/4 of Section , T N, R			Long <b>-92° 5' 52.841"</b>				
Facility ID		County <b>Douglas</b>		County Code <b>16</b>		Civil Town/City/ or Village <b>Superior</b>	

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 48		1	<b>CONCRETE</b>											
			1	<b>SUBBASE, sand and gravel.</b>											
			2	<b>LEAN CLAY (CL), plastic, 5YR 4/6 reddish brown, no odor, no moisture, very stiff.</b>				0.0	2.75						
			3					0.2	3.2						
			4	As above, sandier clay seam at 4' bgs.											
2 GP	60 60		5	As above.	CL										
			6					0.1	3.25						
			7												
			8												
			9												
			10	E.O.B. at 10' bgs.				01	3.25						Soil sample from 8.0' - 10.0' bgs.

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

Signature  Firm **TRC Environmental** Tel: Fax:



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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B17D</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/6/2016</b>		Date Drilling Completed <b>7/6/2016</b>	
Drilling Method <b>Geoprobe</b>						
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL		Surface Elevation Feet MSL	
					Borehole Diameter <b>2.1 inches</b>	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,596 N, 1,442,796 E S/C(N)</b>			Lat <b>46° 43' 14.191"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	
1/4 of Section , T N, R			Long <b>-92° 5' 46.192"</b>			

Facility ID	County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>
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Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 3		1	<b>CONCRETE</b>											
			1	<b>SUBBASE</b> , sand and gravel, wood fragments underlying subbase.				<1	N/A						
			2	<b>LEAN CLAY (CL)</b> , plastic, 5YR 4/6 yellowish red to 5YR 3/4 dark reddish brown, no odor, no moisture, very stiff.											
2 GP	60 60		5	As above.	CL										
			6					<1	2.5						
			7												
			8					<1	2.9						
			9												
			10	E.O.B. at 10' bgs.											Soil sample from 8.0' - 10.0' bgs.

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

Signature	Firm <b>TRC Environmental</b>	Tel: Fax:
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Route To: Watershed/Wastewater  Waste Management   
Remediation/Redevelopment  Other

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B17E</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>	
Drilling Method <b>Geoprobe</b>						
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL	Surface Elevation Feet MSL	Borehole Diameter <b>2.1 inches</b>	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/>			Local Grid Location			
State Plane <b>573,723 N, 1,442,741 E S/C/N</b>			Lat <b>46° 43' 15.428"</b>			
1/4 of Section <b>T N, R</b>			Long <b>-92° 5' 47.023"</b>			
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200	
1 GP	60 36		1	<b>CONCRETE</b>										
				<b>SUBBASE, sand and gravel.</b>										
				<b>WELL-GRADED SAND (SW), well rounded, fine to coarse grained, 7.5YR 4/6 strong brown, slight petroleum odor, moist.</b>	SW			11.7	0.25					
2 GP	60 60		2	<b>LEAN CLAY (CL), plastic, 5YR 4/6 reddish brown, slight petroleum odor, moist, very stiff.</b>				37.7	3.25					
				<b>As above.</b>	CL			244.4	3.25					
			3	<b>As above.</b>	CL			156.4	2.4					
				<b>E.O.B. at 10' bgs.</b>									Soil sample from 8.0' - 10.0' bgs.	

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

Signature	Firm <b>TRC Environmental</b>	Tel: Fax:
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Route To: Watershed/Wastewater  Waste Management   
Remediation/Redevelopment  Other

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B17F</b>		
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>		
WI Unique Well No.			DNR Well ID No.		Common Well Name		
Final Static Water Level <b>Feet MSL</b>			Surface Elevation <b>Feet MSL</b>		Borehole Diameter <b>2.1 inches</b>		
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,663 N, 1,442,740 E S/C/N</b>			Lat <b>46° 43' 14.832"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W		
1/4 of Section , T N, R			Long <b>-92° 5' 47.019"</b>				
Facility ID		County <b>Douglas</b>		County Code <b>16</b>		Civil Town/City/ or Village <b>Superior</b>	

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200	
1 GP	60 42		1	<b>CONCRETE</b>										
				<b>SUBBASE, sand and gravel.</b>										
2 GP	60 54		2	<b>POORLY-GRADED SAND (SP), medium grain, sub-rounded, 7.5 YR 4/6 strong brown, no odor, moist, loose.</b>	SP			1.2	0.25					
			3	<b>LEAN CLAY (CL), plastic, 5YR 4/6 yellowish red, no odor, moist, very stiff.</b>				<1	2.25					
			5	As above.	CL			<1	3.6					
			8					<1	3.2					Soil sample from 8.0' - 10.0' bgs.
			10	E.O.B. at 10' bgs.										

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Signature Firm **TRC Environmental** Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B19D</b>		
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>		
WI Unique Well No.			DNR Well ID No.		Common Well Name		
Final Static Water Level <b>Feet MSL</b>			Surface Elevation <b>Feet MSL</b>		Borehole Diameter <b>2.1 inches</b>		
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,540 N, 1,443,470 E S/C/N</b>			Lat <b>46° 43' 13.81"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W		
1/4 of Section , T N, R			Long <b>-92° 5' 36.499"</b>				
Facility ID		County <b>Douglas</b>		County Code <b>16</b>		Civil Town/City/ or Village <b>Superior</b>	

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	U S C S	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 48		0	<b>CONCRETE</b>											
			1	<b>SUBBASE, sand and gravel.</b>											
			2	<b>LEAN CLAY (CL), plastic, 5YR 4/5 yellowish red, no odor, no moisture, very stiff.</b>				<1	2.5						
			3					3.9	2.4						
2 GP	60 60		5	As above, sulphur to musky odor from 5' to 7.5' bgs; no obvious contamination.	CL			<1	2.4						
			6					<1	2.4						
			7												
			8					<1	2.2						
			9												
			10	E.O.B. at 10' bgs.											

Soil sample  
from 8.0' -  
10.0' bgs.

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Signature Firm **TRC Environmental** Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

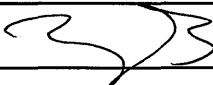
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Route To: Watershed/Wastewater  Waste Management   
Remediation/Redevelopment  Other

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B19E</b>		
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>		
WI Unique Well No.			DNR Well ID No.		Common Well Name		
Final Static Water Level Feet MSL			Surface Elevation Feet MSL		Borehole Diameter <b>2.1 inches</b>		
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,571 N, 1,443,389 E S/C(N)</b>			Lat <b>46° 43' 14.101"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W		
1/4 of Section , T N, R			Long <b>-92° 5' 37.663"</b>				
Facility ID		County <b>Douglas</b>		County Code <b>16</b>		Civil Town/City/ or Village <b>Superior</b>	

Sample	Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
										Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1	GP	60 48		1	<b>CONCRETE</b>											
				1	<b>SUBBASE, sand and gravel.</b>											
				2	<b>LEAN CLAY (CL), plastic, 5YR 4/5 yellowish red, slightly musky odor throughout 1' to 5' bgs interval, no moisture, very stiff.</b>				<1	3.7						
				3					52.6	2.3						
				4												
2	GP	60 60		5	As above, no odor, little grey mottles from 5' to 7' bgs.	CL										
				6					37.4	2.6						
				7												
				8					26.7	2.4						
				9												
				10	E.O.B. at 10' bgs.											Soil sample from 8.0' - 10.0' bgs.

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

Signature  Firm **TRC Environmental** Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>		License/Permit/Monitoring Number		Boring Number <b>B19F</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>	Date Drilling Completed <b>7/7/2016</b>	Drilling Method <b>Geoprobe</b>
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL	Surface Elevation Feet MSL	Borehole Diameter <b>2.1 inches</b>
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,582 N, 1,443,306 E S/C/N</b>			Local Grid Location		
1/4 of <b>T</b> N, R			Lat <b>46° 43' 14.182"</b>	<input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	
Long <b>-92° 5' 38.864"</b>					

Facility ID	County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>
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Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 48		1	<b>CONCRETE</b>											
				<b>SUBBASE, sand and gravel.</b>											
2 GP	60 60		2	<b>LEAN CLAY (CL), plastic, color grades from 7.5YR 4/2 brown to 5YR 4/6 yellowish red over 3' to 5' bgs interval, no odor, no moisture, very stiff.</b>				<1	2.8						
			3				<1	2.4							
			5	As above.	CL										
			6	As above; gravel and sand seam at 6' bgs.			8.1	2.5							
			8				20.0	2.7						Soil sample from 8.0' - 10.0' bgs.	
			10	E.O.B. at 10' bgs.											

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Signature 	Firm <b>TRC Environmental</b>	Tel: Fax:
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Route To: Watershed/Wastewater  Waste Management   
Remediation/Redevelopment  Other

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B19G</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>	
Drilling Method <b>Geoprobe</b>						
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL		Surface Elevation Feet MSL	
					Borehole Diameter <b>2.1 inches</b>	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/>			Local Grid Location			
State Plane <b>573,552 N, 1,443,292 E S/C(N)</b>			Lat <b>46° 43' 13.886"</b>			<input type="checkbox"/> N <input type="checkbox"/> E
1/4 of Section , T N, R			Long <b>-92° 5' 39.054"</b>			<input type="checkbox"/> S <input type="checkbox"/> W
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 12		1	<b>CONCRETE</b>											
			1	<b>SUBBASE, sand and gravel.</b>											
			2	<b>LEAN CLAY (CL), plastic, 5YR 4/6 yellowish red, no odor, moist, stiff; sample sleeve and outside of sample wet upon retrieval, but soil core interior relatively dry.</b>				0.4	1.4						Water trapped beneath roadway.
			3					0.4	1.8						
2 GP	60 60		5	As above.	CL			0.3	1.8						Soil sample from 8.0' - 10.0' bgs.
			6												
			8	As above, very stiff.				<1	2.5						
			10	E.O.B. at 10' bgs.											

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

Signature Firm **TRC Environmental** Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B20F</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>	
Drilling Method <b>Geoprobe</b>			Final Static Water Level <b>Feet MSL</b>		Surface Elevation <b>Feet MSL</b>	
WI Unique Well No.		DNR Well ID No.		Common Well Name		Borehole Diameter <b>2.1 inches</b>
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,564 N, 1,443,644 E S/C/N</b>			Lat <b>46° 43' 14.096"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	
1/4 of Section , T N, R			Long <b>-92° 5' 34.001"</b>			

Facility ID	County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>
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Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 48		1	<b>CONCRETE</b>											
			1	<b>SUBBASE, sand and gravel.</b>											
2 GP	60 60		2	<b>LEAN CLAY (CL), plastic, 5YR 4/6 yellowish red, no odor, no moisture, very stiff.</b>				<1	2.8						
			3					<1	2.8						
			5	As above.	CL				<1	2.5					
			8	As above, slightly fatter and wetter at 7.5' bgs.					<1	2.0					Soil sample from 8.0' - 10.0' bgs.
			10	E.O.B. at 10' bgs.											

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

Signature	Firm <b>TRC Environmental</b>	Tel: Fax:
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Route To: Watershed/Wastewater  Waste Management   
Remediation/Redevelopment  Other

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B22G</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>	
Drilling Method <b>Geoprobe</b>						
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL	Surface Elevation Feet MSL	Borehole Diameter <b>2.1 inches</b>	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,500 N, 1,444,103 E S/C/N</b>			Lat <b>46° 43' 13.579"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	
1/4 of Section , T N, R			Long <b>-92° 5' 27.393"</b>			
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties						RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 / 36		0	<b>CONCRETE</b>											
			1	<b>SUBBASE, sand and gravel.</b>											
			2	<b>LEAN CLAY (CL), plastic, 5YR 4/6 yellowish red, musky odor, no moisture, very stiff.</b>				<1	2.8						
			3					<1	2.2						
2 GP	60 / 60		5	<b>As above, color change to 2.5YR 4/1 dark reddish grey with mottles of original 5YR 4/6 yellowish red, stiff.</b>	CL			<1	1.9						
			6					<1	2.3						
			8					<1	2.3						
			10	<b>E.O.B. at 10' bgs.</b>											Soil sample from 8.0' - 10.0' bgs.

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

Signature	Firm <b>TRC Environmental</b>	Tel: Fax:
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Route To: Watershed/Wastewater  Waste Management   
Remediation/Redevelopment  Other

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B22H</b>		
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>		
WI Unique Well No.			DNR Well ID No.		Common Well Name		
Final Static Water Level <b>Feet MSL</b>			Surface Elevation <b>Feet MSL</b>		Borehole Diameter <b>2.1 inches</b>		
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,429 N, 1,444,104 E S/C(N)</b>			Lat <b>46° 43' 12.887"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W		
1/4 of Section , T N, R			Long <b>-92° 5' 27.355"</b>		Feet <input type="checkbox"/> S <input type="checkbox"/> W		
Facility ID		County <b>Douglas</b>		County Code <b>16</b>		Civil Town/City/ or Village <b>Superior</b>	

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 48		1	<b>CONCRETE</b>				<1	2.9						
			2	<b>SUBBASE</b> , sand and gravel; subbase grades into underlying clay. <b>LEAN CLAY (CL)</b> , plastic, 5YR 4/6 yellowish red, no odor, no moisture, very stiff.				<1	2.0						
2 GP	60 60		5	As above.	CL			<1	2.0						
			8					<1	2.1						
			10	E.O.B. at 10' bgs.											Soil sample from 8.0' - 10.0' bgs.

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

Signature	Firm <b>TRC Environmental</b>	Tel: Fax:
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Route To: Watershed/Wastewater  Waste Management   
Remediation/Redevelopment  Other

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B22I</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>	
Drilling Method <b>Geoprobe</b>						
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL		Surface Elevation Feet MSL	
					Borehole Diameter <b>2.1 inches</b>	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,555 N, 1,444,026 E S/C/N</b>			Lat <b>46° 43' 14.105"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E	
1/4 of 1/4 of Section , T N, R			Long <b>-92° 5' 28.518"</b>		<input type="checkbox"/> S <input type="checkbox"/> W	
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	U S C S	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 24		0	<b>CONCRETE</b>											
			1	<b>SUBBASE</b> , sand and gravel; subbase grades into underlying clay.				<1	3.5						
			2	<b>LEAN CLAY (CL)</b> , plastic, 7.5YR 4/2 brown, earthy-sweet odor, no moisture, very stiff.	CL										
			3												
			4	As above, clay underlain by rotting timbers; black, damp, no odor.											
2 GP	60 18		5	<b>WELL-GRADED SAND (SW)</b> , fine to coarse grained, sub-rounded to sub-angular, cohesive, 7.5YR 3/2 dark brown, no odor, moist.	SW			1.1	3.2						
			6												
			7												
			8	<b>LEAN CLAY (CL)</b> , plastic, 5YR 4/6 yellowish red, no odor, no moisture, stiff.	CL			<1	1.7						
			9												
			10	E.O.B. at 10' bgs.											Soil sample from 8.0' - 10.0' bgs.

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

Signature	Firm <b>TRC Environmental</b>	Tel: Fax:
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Route To: Watershed/Wastewater  Waste Management   
Remediation/Redevelopment  Other

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B22J</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>	
Drilling Method <b>Geoprobe</b>						
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL		Surface Elevation Feet MSL	
					Borehole Diameter <b>2.1 inches</b>	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,551 N, 1,444,103 E S/C/Ⓝ</b>			Lat <b>46° 43' 14.087"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	
1/4 of Section , T N, R			Long <b>-92° 5' 27.413"</b>			
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 48		1	<b>CONCRETE</b>											
			1	<b>SUBBASE</b> , sand and gravel; subbase grades into underlying clay.				0.7	2.6						
			2	<b>LEAN CLAY (CL)</b> , plastic, 5YR 4/6 yellowish red, no odor, no moisture, very stiff.				0.3	2.4						
2 GP	60 60		5	As above.	CL										
			6	As above, wet sample sleeve from 6' to 7.5' interval; sample core itself in this interval is of similar moisture to rest of sample.				0.3	2.4						
			8	As above, stiff.				0.3	1.8						Soil sample from 8.0' - 10.0' bgs.
			10	E.O.B. at 10' bgs.											

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

Signature Firm **TRC Environmental** Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B22K</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>	
Drilling Method <b>Geoprobe</b>						
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL		Surface Elevation Feet MSL	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,552 N, 1,444,073 E S/C(N)</b>			Lat <b>46° 43' 14.093"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	
1/4 of _____, T N, R			Long <b>-92° 5' 27.85"</b>		Feet <input type="checkbox"/> S <input type="checkbox"/> W	
Facility ID	County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>			

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 48		0	<b>CONCRETE</b>											
			1	<b>SUBBASE</b> , sand and gravel; subbase grades into underlying clay.				<1	4.0						
			2	<b>LEAN CLAY (CL)</b> , plastic, 5YR 4/2 dark reddish grey, no odor, no moisture, very stiff.											
			3	As above, black organic rich 2" seam at 2.5' bgs.				<1	2.6						
2 GP	60 48		5	As above; slightly softer and fatter with depth.	CL			<1	2.5						
			8	As above, stiff.				<1	1.3						Soil sample from 8.0' - 10.0' bgs.
			10	E.O.B. at 10' bgs.											

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

Signature	Firm <b>TRC Environmental</b>	Tel: Fax:
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Route To: Watershed/Wastewater  Waste Management   
Remediation/Redevelopment  Other

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B26D</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>	
Drilling Method <b>Geoprobe</b>						
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL		Surface Elevation Feet MSL	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,534 N, 1,444,670 E S/C(N)</b>			Lat <b>46° 43' 14.069"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	
1/4 of Section , T N, R			Long <b>-92° 5' 19.271"</b>			
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 30		1	<b>CONCRETE</b>											
				<b>SUBBASE, sand and gravel.</b>											
2 GP	60 60		2	<b>LEAN CLAY (CL), plastic, 5YR 4/6 yellowish red, no odor, no moisture, very stiff.</b>				4.2	2.3						
			3					0.9	3.1						
			6	As above.	CL			<1	2.75						
			8					<1	3.0					Soil sample from 8.0' - 10.0' bgs.	
			10	E.O.B. at 10' bgs.											

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

Signature	Firm <b>TRC Environmental</b>	Tel: Fax:
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Route To: Watershed/Wastewater  Waste Management   
Remediation/Redevelopment  Other

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B27A</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>	
Drilling Method <b>Geoprobe</b>						
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL		Surface Elevation Feet MSL	
					Borehole Diameter <b>2.1 inches</b>	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/>			Local Grid Location			
State Plane <b>573,532 N, 1,444,752 E S/C(N)</b>			Lat <b>46° 43' 14.064"</b>			<input type="checkbox"/> N <input type="checkbox"/> E
1/4 of Section , T N, R			Long <b>-92° 5' 18.092"</b>			Feet <input type="checkbox"/> S <input type="checkbox"/> W
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200	
1 GP	60 48		1	<b>CONCRETE</b>										
			2	<b>SUBBASE, sand and gravel.</b>				2.4						
2 GP	60 0		3	<b>LEAN CLAY (CL), plastic, 5YR 4/6 yellowish red, no odor, no moisture, very stiff.</b>	CL			2.4						
			4											
			5											
			6											
			7											
			8											
			9											
			10											
				As above.										
				Hit unmarked water lateral; boring abandoned at ~8' bgs.										Hit water lateral while boring 5' - 10' interval; sample continuously soaked with city water; no PID possible from 5'-10'.

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

Signature  Firm **TRC Environmental** Tel: Fax:

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B28F</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>	
Drilling Method <b>Geoprobe</b>			Final Static Water Level Feet MSL		Surface Elevation Feet MSL	
WI Unique Well No.		DNR Well ID No.		Common Well Name		Borehole Diameter <b>2.1 inches</b>
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,526 N, 1,444,921 E S/C(N)</b>			Lat <b>46° 43' 14.048"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	
1/4 of Section , T N, R			Long <b>-92° 5' 15.673"</b>			
Facility ID		County <b>Douglas</b>		County Code <b>16</b>		Civil Town/City/ or Village <b>Superior</b>




Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 48			<b>CONCRETE</b>											
			1	<b>SUBBASE, sand and gravel.</b>											
			2	<b>LEAN CLAY (CL), low plasticity, 2.5YR 3/1 dark reddish grey, petroleum odor, no moisture, stiff to very stiff.</b>				4,096	3.6						
			3					3,704	1.8						
			4	As above; interval from 3' to 5' bgs has medium plasticity, slightly less petroleum odor.											
2 GP	60 60		5		CL										
			6					3,751	3.25						
			7	As above, wetter and fatter over 6' to 7' bgs interval.											
			8					185.4	1.6						
			9												
			10	As above; higher plasticity from 9' to 10' bgs. E.O.B. at 10' bgs.											Soil sample from 8.0' - 10.0' bgs.

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

Signature	Firm <b>TRC Environmental</b>	Tel: Fax:
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Route To: Watershed/Wastewater  Waste Management   
Remediation/Redevelopment  Other

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>		License/Permit/Monitoring Number		Boring Number <b>B28G</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>	Date Drilling Completed <b>7/7/2016</b>	Drilling Method <b>Geoprobe</b>
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL	Surface Elevation Feet MSL	Borehole Diameter <b>2.1 inches</b>
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,528 N, 1,444,849 E S/C/N</b>			Local Grid Location		
1/4 of Section <b>T N, R</b>			Lat <b>46° 43' 14.054"</b>	<input type="checkbox"/> N <input type="checkbox"/> E	
			Long <b>-92° 5' 16.701"</b>	<input type="checkbox"/> S <input type="checkbox"/> W	
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>	

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200	
1 GP	60 60		1	<b>CONCRETE</b>										
				<b>SUBBASE, sand and gravel.</b>										
2 GP	60 60		2	<b>LEAN CLAY (CL), medium plasticity, 5YR 4/4 reddish brown, petroleum odor, no moisture, very stiff.</b>	CL			1.4	3.2					
			3					820	2.3					
			4											
			5											
			6					1443	2.0					
			7											
			8					456	2.1					
			9											
			10	<b>E.O.B. at 10' bgs.</b>										

Soil sample from 8.0' - 10.0' bgs.

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

Signature 	Firm <b>TRC Environmental</b>	Tel: Fax:
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Route To: Watershed/Wastewater  Waste Management   
Remediation/Redevelopment  Other

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B28H</b>		
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>		
WI Unique Well No.			DNR Well ID No.		Common Well Name		
Final Static Water Level <b>Feet MSL</b>			Surface Elevation <b>Feet MSL</b>		Borehole Diameter <b>2.1 inches</b>		
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,480 N, 1,444,942 E S/C/N</b>			Lat <b>46° 43' 13.6"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W		
1/4 of Section , T N, R			Long <b>-92° 5' 15.349"</b>				
Facility ID		County <b>Douglas</b>		County Code <b>16</b>		Civil Town/City/ or Village <b>Superior</b>	

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 42		0	<b>CONCRETE</b>											
			1	<b>SUBBASE, sand and gravel.</b>											
			2	<b>LEAN CLAY (CL), plastic, 5YR 4/6 yellowish red, petroleum odor, no moisture, very stiff.</b>				1330	2.25						
			3					2640	3.25						
			4												
2 GP	60 60		5	<b>As above, decreaseing petroleum odor with depth.</b>	CL			1802	2.25						
			6					640	2.1						
			7												
			8												
			9												
			10	<b>E.O.B. at 10' bgs.</b>											

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

Signature	Firm <b>TRC Environmental</b>	Tel: Fax:
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This form is authorized by Chapters 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats. Completion of this form is mandatory. Failure to file this form may result in 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 this form is not intended to be used for any other purpose. NOTE: See instructions for more information, including where the completed form should be sent.

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>		License/Permit/Monitoring Number		Boring Number <b>B28I</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>	Date Drilling Completed <b>7/7/2016</b>	Drilling Method <b>Geoprobe</b>
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL	Surface Elevation Feet MSL	Borehole Diameter <b>2.1 inches</b>
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,419 N, 1,444,943 E S/C(N)</b>			Local Grid Location		
1/4 of Section , T N, R			Lat <b>46° 43' 13"</b>	<input type="checkbox"/> N <input type="checkbox"/> E	
			Long <b>-92° 5' 15.319"</b>	<input type="checkbox"/> S <input type="checkbox"/> W	
Facility ID	County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 36		0	<b>CONCRETE</b>											
			1	<b>SUBBASE, sand and gravel.</b>											
			2	<b>WELL-GRADED SAND (SW), fine to coarse grained, subrounded, cohesive, 2.5Y 6/3 light yellowish brown, no odor, no moisture.</b>	SW			22.7	0.75						
			3	<b>LEAN CLAY (CL), plastic, 5YR 4/6 yellowish red, slight petroleum odor, no moisture, very stiff.</b>				357.3	2.2						
2 GP	60 60		5	As above.	CL			1844	2.3						
			8					77.8	2.25						
			10	E.O.B. at 10' bgs.											Soil sample from 8.0' - 10.0' bgs.

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

Signature 	Firm <b>TRC Environmental</b>	Tel: Fax:
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Route To: Watershed/Wastewater  Waste Management   
Remediation/Redevelopment  Other

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B28J</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>	
Drilling Method <b>Geoprobe</b>						
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL		Surface Elevation Feet MSL	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,526 N, 1,445,012 E S/C(N)</b>			Lat <b>46° 43' 14.074"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	
1/4 of Section , T N, R			Long <b>-92° 5' 14.363"</b>		Feet <input type="checkbox"/> S <input type="checkbox"/> W	
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 48		1	<b>CONCRETE</b>											
			1	<b>SUBBASE, sand and gravel.</b>											
			2	<b>LEAN CLAY (CL), plastic, 5YR 4/6 yellowish red, no odor, no moisture, very stiff.</b>				<1	3.25						
			3	As above; slight odor at 1' bgs and color variation of 10YR 3/2 brown related to subbase contact; color back to dominant 5YR 4/6 and no odor at 2' bgs.			<1	2.5							
			5	As above.	CL		<1	2.6							
			8				<1	2.5							
			10	E.O.B. at 10' bgs.											Soil sample from 8.0' - 10.0' bgs.

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

Signature Firm **TRC Environmental** Tel: Fax:

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B28K</b>		
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>		
Drilling Method <b>Geoprobe</b>							
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL		Surface Elevation Feet MSL		
					Borehole Diameter <b>2.1 inches</b>		
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,594 N, 1,444,954 E S/C(N)</b>			Lat <b>46° 43' 14.73"</b>			Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E	
1/4 of Section , T N, R			Long <b>-92° 5' 15.225"</b>			<input type="checkbox"/> S <input type="checkbox"/> W	
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>			

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 42		0	<b>CONCRETE</b>											
			1	<b>SUBBASE, sand and gravel.</b>											
			2	<b>LEAN CLAY (CL), plastic, 5YR 4/6 yellowish red, slight petroleum odor, no moisture, stiff.</b>				1.6	2.0						
			3	As above, gravel and sand seam from 2' to 4' bgs.				4.2	1.25						
2 GP	60 36		5	As above; 5' to 10' bgs feature four distinct sandy and gravelly seams with petroleum odors and black staining, soft.	CL			2.4	0.5						
			8	As above, increased sand content.				1.1	0.2						
			9	As above, but clay becomes fatter, wetter below 8' bgs.											Soil sample from 8.0' - 10.0' bgs.

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

Signature	Firm <b>TRC Environmental</b>	Tel: Fax:
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Route To: Watershed/Wastewater  Waste Management   
Remediation/Redevelopment  Other

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B28L</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>	
Drilling Method <b>Geoprobe</b>						
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL		Surface Elevation Feet MSL	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,627 N, 1,444,956 E S/C(N)</b>			Lat <b>46° 43' 15.054"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	
1/4 of Section , T N, R			Long <b>-92° 5' 15.211"</b>		Feet <input type="checkbox"/> Feet <input type="checkbox"/> W	
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200	
1 GP	60 60		1	<b>CONCRETE</b>										
				<b>SUBBASE, sand and gravel.</b>										
2 GP	60 60		2	<b>LEAN CLAY (CL), plastic, 5YR 4/6 yellowish red, no odor, no moisture, stiff to very stiff.</b>				0.8	1.1					
				<b>Subbase beneath roadway has petroleum odors, black staining; subbase grades from 1' to 2' bgs from subbase to lean clay.</b>			0.3	2.25						
				<b>As above.</b>	CL		0.4	2.5						
			3					0.5	2.2					
			4											
			5											
			6											
			7											
			8											
			9											
			10	<b>E.O.B. at 10' bgs.</b>										

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

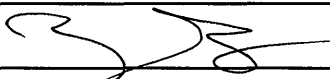
Signature  Firm **TRC Environmental** Tel:   
Fax:

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>		License/Permit/Monitoring Number		Boring Number <b>B36P</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>	Date Drilling Completed <b>7/7/2016</b>	Drilling Method <b>Geoprobe</b>
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL	Surface Elevation Feet MSL	Borehole Diameter <b>2.1 inches</b>
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,457 N, 1,447,502 E S/C(N)</b>			Local Grid Location		
1/4 of Section , T N, R			Lat <b>46° 43' 14.042"</b>	<input type="checkbox"/> N <input type="checkbox"/> E	
			Long <b>-92° 4' 38.606"</b>	Feet <input type="checkbox"/> S <input type="checkbox"/> W	
Facility ID	County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200	
1 GP	60 48		1	<b>CONCRETE</b>										
			2	<b>SUBBASE, sand and gravel.</b>										
2 GP	60 60		3	<b>LEAN CLAY (CL), plastic, 5YR 4/6 yellowish red, no odor, no moisture, very stiff.</b>	CL			1.2	2.75					
			4					5.4	3.2					
			6					1.3	2.25					
			8					<1	3.0					
			10	<b>E.O.B. at 10' bgs.</b>										Soil sample from 8.0' - 10.0' bgs.

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Signature  Firm **TRC Environmental** Tel: Fax:

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B5D</b>		
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/6/2016</b>		Date Drilling Completed <b>7/6/2016</b>		
WI Unique Well No.			DNR Well ID No.		Common Well Name		
Final Static Water Level <b>Feet MSL</b>			Surface Elevation <b>Feet MSL</b>		Borehole Diameter <b>2.1 inches</b>		
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,639 N, 1,441,227 E S/C(N)</b>			Lat <b>46° 43' 14.208"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W		
1/4 of Section , T N, R			Long <b>-92° 6' 8.72"</b>				
Facility ID		County <b>Douglas</b>		County Code <b>16</b>		Civil Town/City/ or Village <b>Superior</b>	

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 24		0	<b>CONCRETE</b>											
			1	<b>SUBBASE, sand and gravel.</b>											
			2	<b>LEAN CLAY (CL), plastic, 5YR 3/4 dark reddish brown, no odor, no moisture, very stiff.</b>				0.0	2.4						
			3					0.0	2.6						
2 GP	60 60		5	As above.	CL										
			6	As above; increased sand content from 6' to 7' bgs.				0.0	4.0						
			7	As above, also with grey mottles.											
			8					0.0	2.3						
			9												
			10	E.O.B. at 10' bgs.											Soil sample from 8.0' - 10.0' bgs.

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

Signature Firm **TRC Environmental** Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B5E</b>
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/6/2016</b>	Date Drilling Completed <b>7/6/2016</b>	Drilling Method <b>Geoprobe</b>
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL	Surface Elevation Feet MSL	Borehole Diameter <b>2.1 inches</b>
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,637 N, 1,441,291 E S/C(N)</b>			Lat <b>46° 43' 14.203"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W
1/4 of Section , T N, R			Long <b>-92° 6' 7.801"</b>		
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>	

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200	
1 GP	60 6		0	<b>CONCRETE</b>										
			1	<b>SUBBASE, sand and gravel.</b>										
			2	<b>WELL-GRADED SAND WITH CLAY (SW-SC), fine to coarse grained, 10YR 4/4 dark yellowish brown, petroleum odor, wet.</b>				0.1	0.0					
			3											
			4											
2 GP	60 30		5		SW-SC			0.0	0.0					
			6											
			7											
			8	As above, drier.				1.4	0.5					
			9	As above, featuring decreased sand content, gley2 4/10B mottles, petroleum odor.										
			10	E.O.B. at 10' bgs.										Soil sample from 8.0' - 10.0' bgs.

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

Signature	Firm <b>TRC Environmental</b>	Tel: Fax:
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Route To: Watershed/Wastewater  Waste Management   
Remediation/Redevelopment  Other

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>		License/Permit/Monitoring Number		Boring Number <b>B5F</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>		Date Drilling Started <b>7/6/2016</b>		Date Drilling Completed <b>7/6/2016</b>	
Drilling Method <b>Geoprobe</b>		WI Unique Well No.		DNR Well ID No.	
Common Well Name		Final Static Water Level Feet MSL		Surface Elevation Feet MSL	
Borehole Diameter <b>2.1 inches</b>		Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,635 N, 1,441,364 E S/C/N</b>		Local Grid Location Lat <b>46° 43' 14.197"</b> <input type="checkbox"/> N <input type="checkbox"/> E Long <b>-92° 6' 6.74"</b> <input type="checkbox"/> S <input type="checkbox"/> W	
1/4 of Section , T N, R		County <b>Douglas</b>		County Code <b>16</b>	
Facility ID		Civil Town/City/ or Village <b>Superior</b>			

Sample Number and Type	Length Alt. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 42		1	<b>CONCRETE</b>											
			1	<b>SUBBASE, sand and gravel.</b>											
			2	<b>LEAN CLAY (CL), plastic, 2.5YR 4/6 red, no odor, no moisture, hard to very stiff.</b>				0.0	5+						
			3					0.0	3.3						
2 GP	60 60		5	As above; petroleum odor over 5' to 10' bgs interval.	CL										
			6	As above, sandier from 6' to 7.5' bgs.				1.4	4.3						
			7												
			8												
			9					1.0	3.1						
			10	E.O.B. at 10' bgs.											Soil sample from 8.0' - 10.0' bgs.





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

Signature	Firm <b>TRC Environmental</b>	Tel: Fax:
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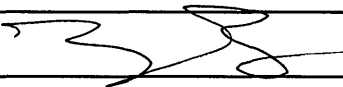
This form is authorized by Chapters 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats. Completion of this form is mandatory. Failure to file this form may result in forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See instructions for more information, including where the completed form should be sent.

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B5G</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/6/2016</b>		Date Drilling Completed <b>7/6/2016</b>	
Drilling Method <b>Geoprobe</b>						
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL		Surface Elevation Feet MSL	
					Borehole Diameter <b>2.1 inches</b>	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,635 N, 1,441,417 E S/C(N)</b>			Lat <b>46° 43' 14.217"</b>		Local Grid Location	
1/4 of Section , T N, R			Long <b>-92° 6' 5.987"</b>		Feet <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200		
1 GP	60 48		1	<b>CONCRETE</b>											
			1	<b>SUBBASE, sand and gravel.</b>											
			2	<b>LEAN CLAY (CL), plastic, 5YR 4/4 reddish brown, no odor, no moisture, very stiff; some black staining from 1' to 2' bgs interval.</b>				0.0	3.2						
			3					0.0	3.4						
2 GP	60 54		5	<b>As above, some mottling (&lt;10%) of 5YR 5/3 reddish brown, slight petroleum and musky odor throughout 5' to 10' bgs interval.</b>	CL			0.1	3.5						
			6					0.1	3.9						
			8												
			9												
			10	<b>E.O.B. at 10' bgs.</b>											

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

Signature  Firm **TRC Environmental** Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>		License/Permit/Monitoring Number		Boring Number <b>B6C</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>		Date Drilling Started <b>7/6/2016</b>		Date Drilling Completed <b>7/6/2016</b>	
Drilling Method <b>Geoprobe</b>		Final Static Water Level <b>Feet MSL</b>		Surface Elevation <b>Feet MSL</b>	
Borehole Diameter <b>2.1 inches</b>		Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,635 N, 1,441,494 E S/C/N</b>		Local Grid Location Lat <b>46° 43' 14.237"</b> <input type="checkbox"/> N <input type="checkbox"/> E Long <b>-92° 6' 4.883"</b> <input type="checkbox"/> S <input type="checkbox"/> W	
1/4 of Section , T N, R		County <b>Douglas</b>		Civil Town/City/ or Village <b>Superior</b>	

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200	
1 GP	60 36		0	<b>CONCRETE</b>										
			1	<b>SUBBASE</b> , sand and gravel; subbase grades into underlying lean clay.				0.0	1.7					
			2	<b>LEAN CLAY (CL)</b> , plastic, 5YR 4/6 yellowish red, no odor, no moisture, stiff to very stiff.				0.0	2.6					
2 GP	60 60		5	As above, wetter, with little sand and silt.	CL			0.0	2.2					
			6					0.0	2.2					
			8					0.0	2.5					
			10	E.O.B. at 10' bgs.										Soil sample from 8.0' - 10.0' bgs.

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

Signature	Firm <b>TRC Environmental</b>	Tel: _____ Fax: _____
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This form is authorized by Chapters 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats. Completion of this form is mandatory. Failure to file this form may result in 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 this form is not intended to be used for any other purpose. NOTE: See instructions for more information, including where the completed form should be sent.

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

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B7C</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/6/2016</b>		Date Drilling Completed <b>7/6/2016</b>	
Drilling Method <b>Geoprobe</b>						
WI Unique Well No.	DNR Well ID No.	Common Well Name	Final Static Water Level Feet MSL		Surface Elevation Feet MSL	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,626 N, 1,441,788 E S/C(N)</b>			Lat <b>46° 43' 14.223"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	
1/4 of Section , T N, R			Long <b>-92° 6' 0.664"</b>			
Facility ID		County <b>Douglas</b>	County Code <b>16</b>	Civil Town/City/ or Village <b>Superior</b>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200	
1 GP	60 30		1	<b>CONCRETE</b>										
			1	<b>SUBBASE, sand and gravel.</b>										
2 GP	60 54		2	<b>CLAYEY SAND (SC), noncohesive, nonplastic, 5YR 5/1 reddish grey, petroleum odor, no moisture, black staining.</b>				1.2	5+					
			3	<b>As above; loamy, low plasticity, color change to 5YR 4/1 dark grey.</b>	SC			3.9	5+					
			5	<b>LEAN CLAY (CL), plastic, 5YR 4/6 yellowish red, no odor, no moisture, very stiff.</b>					0.1	2.2				
			8		CL			0.2	2.75					
			10	<b>E.O.B. at 10' bgs.</b>										

Soil sample from 8.0' - 10.0' bgs.

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



Signature Firm **TRC Environmental** Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

This form is authorized by Chapters 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats. Completion of this form is mandatory. Failure to file this form may result in 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 this form is not intended to be used for any other purpose. NOTE: See instructions for more information, including where the completed form should be sent.

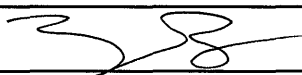


Route To: Watershed/Wastewater  Waste Management   
Remediation/Redevelopment  Other

Facility/Project Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			License/Permit/Monitoring Number		Boring Number <b>B8D</b>	
Boring Drilled By: Name of crew chief (first, last) and Firm <b>Twin Ports Testing, Inc.</b>			Date Drilling Started <b>7/7/2016</b>		Date Drilling Completed <b>7/7/2016</b>	
Drilling Method <b>Geoprobe</b>			Final Static Water Level Feet MSL		Surface Elevation Feet MSL	
WI Unique Well No.		DNR Well ID No.		Common Well Name		Borehole Diameter <b>2.1 inches</b>
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Boring Location <input checked="" type="checkbox"/> State Plane <b>573,522 N, 1,441,594 E S/C(N)</b>			Lat <b>46° 43' 13.147"</b>		Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	
1/4 of Section , T N, R			Long <b>-92° 6' 3.405"</b>			
Facility ID		County <b>Douglas</b>		County Code <b>16</b>		Civil Town/City/ or Village <b>Superior</b>

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth In Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200	
1 GP	60 6		1	<b>FILL</b> , only recovery was small quantities of angular gravel fill.				NA						
2 GP	60 9		5											
			8	<b>LEAN CLAY (CL)</b> , plastic, 5YR 4/6 yellowish red, no odor, moist, very stiff.	CL			0.1	3.2					Soil sample from 8.0' - 10.0' bgs.
			10											

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

Signature  Firm **TRC Environmental** Tel: Fax:

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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**

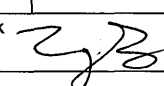
County <b>Douglas</b>	WI Unique Well # of Removed Well <b>()</b>	Hicap #	Facility Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>
Latitude / Longitude (see instructions) <b>46.72055 ° N</b> <b>-92.09946 ° W</b>	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 / 1/4 or Gov't Lot #	Section	Township	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>Belknap Street</b>			Present Well Owner <b>WisDOT NW Region</b>
Well City, Village or Town <b>Superior</b>			Mailing Address of Present Owner <b>1701 N 4th Street</b>
Subdivision Name		Well ZIP Code <b>54880</b>	City of Present Owner <b>Superior</b>
		Lot #	State <b>WI</b>
			ZIP Code <b>54880</b>

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

Reason For Removal From Service <b>Soil Boring</b>	WI Unique Well # of Replacement Well	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>07/06/2016</b>	Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.	Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input checked="" type="checkbox"/> Borehole / Drillhole		Screen removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input checked="" type="checkbox"/> Other (Specify) <b>Geoprobe</b>		Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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)	Casing Diameter (in.)	Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Lower Drillhole Diameter (in.)	Casing Depth (ft.)	If yes, was hole retopped? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
2.1		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
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet)	Required Method of Placing Sealing Material
If yes, to what depth (feet)?		<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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B10E

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>	
Name of Person or Firm Doing Filling & Sealing <b>Twin Ports Testing, Inc.</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>07/06/2016</b>	Date Received	Noted By
Street or Route <b>1301 N 3rd St.</b>	City <b>Superior</b>	State <b>WI</b>	Telephone Number <b>(715)392-7114</b>	Comments
City <b>Superior</b>	State <b>WI</b>	ZIP Code <b>54880</b>	Signature of Person Doing Work 	Date Signed <b>7/19/16</b>

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 this 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**

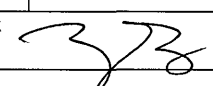
County <b>Douglas</b>		WI Unique Well # of Removed Well <b>()</b>	Hicap #	Facility Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>	
Latitude / Longitude (see instructions) <b>46.72061 ° N</b> <b>-92.09928 ° W</b>		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)	
1/4 / 1/4	1/4	Section	Township	Range <input type="checkbox"/> E <input type="checkbox"/> W	License/Permit/Monitoring #
or Gov't Lot #		Well Street Address <b>Belknap Street</b>		Original Well Owner	
Well City, Village or Town <b>Superior</b>		Well ZIP Code <b>54880</b>		Present Well Owner <b>WisDOT NW Region</b>	
Subdivision Name		Lot #		Mailing Address of Present Owner <b>1701 N 4th Street</b>	
Reason For Removal From Service <b>Soil Boring</b>		WI Unique Well # of Replacement Well		City of Present Owner <b>Superior</b>	
State		ZIP Code		<b>WI 54880</b>	

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

<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy) <b>07/06/2016</b>	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 type="checkbox"/> No <input checked="" type="checkbox"/> N/A Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <b>Geoprobe</b>		Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/> No <input 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: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain)		
Total Well Depth From Ground Surface (ft)	Casing Diameter (in.)	Lower Drillhole Diameter (in.)	Casing Depth (ft.)	Sealing Materials
		<b>2.1</b>		<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete <input type="checkbox"/> Sand-Cement (Concrete) Grout <input checked="" type="checkbox"/> Bentonite Chips
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		Depth to Water (feet)		For Monitoring Wells and Monitoring Well Boreholes Only:
If yes, to what depth (feet)?				<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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B10F

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>	
Name of Person or Firm Doing Filling & Sealing <b>Twin Ports Testing, Inc.</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>07/06/2016</b>	Date Received	Noted By
Street or Route <b>1301 N 3rd St.</b>	Telephone Number <b>(715)392-7114</b>	Comments		
City <b>Superior</b>	State <b>WI</b>	ZIP Code <b>54880</b>	Signature of Person Doing Work 	Date Signed <b>7/19/16</b>

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<input type="checkbox"/> Verification Only of Fill and Seal	<b>Route to DNR Bureau:</b> <input type="checkbox"/> Drinking Water <input type="checkbox"/> Watershed/Wastewater <input type="checkbox"/> Remediation/Redevelopment <input type="checkbox"/> Waste Management <input type="checkbox"/> Other
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1. Well Location Information	2. Facility / Owner Information
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County Douglas	WI Unique Well # of Removed Well ( )	Hicap #	Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)
Latitude / Longitude (see instructions) 46.72043 ° N -92.09947 ° W		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001
1/4 1/4 or Gov't Lot #	Section	Township	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address Belknap Street			Present Well Owner WisDOT NW Region
Well City, Village or Town Superior		Well ZIP Code 54880	Mailing Address of Present Owner 1701 N 4th Street
Subdivision Name		Lot #	City of Present Owner Superior
			State WI
			ZIP Code 54880

3. Filled & Sealed Well / Drillhole / Borehole Information	4. Pump, Liner, Screen, Casing & Sealing Material
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Reason For Removal From Service Soil Boring	WI Unique Well # of Replacement Well	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Screen removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/> No <input 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
<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy) 07/06/2016 If a Well Construction Report is available, please attach.
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>		
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		
Total Well Depth From Ground Surface (ft)	Casing Diameter (in.)	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)
Lower Drillhole Diameter (in.) 2.1	Casing Depth (ft.)	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
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet)	For Monitoring Wells and Monitoring Well Boreholes Only:
If yes, to what depth (feet)?		<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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
 Boring B10G

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/06/2016	Date Received	Noted By
Street or Route 1301 N 3rd St.			Telephone Number (715)392-7114	Comments	
City Superior	State WI	ZIP Code 54880	Signature of Person Doing Work 	Date Signed 7/19/16	



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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 Douglas		WI Unique Well # of Removed Well ( )		Hicap #		Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)	
Latitude / Longitude (see instructions) 46.72030 ° N -92.09947 ° W		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)	
1/4 / 1/4 or Gov't Lot #		Section		Township		Range <input type="checkbox"/> E <input type="checkbox"/> W	
Well Street Address Belknap Street				Present Well Owner WisDOT NW Region			
Well City, Village or Town Superior				Mailing Address of Present Owner 1701 N 4th Street			
Subdivision Name				Well ZIP Code 54880		City of Present Owner Superior	
				State WI		ZIP Code 54880	

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

Reason For Removal From Service Soil Boring		WI Unique Well # of Replacement Well		Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Screen removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy) 07/06/2016		Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A If bentonite chips were used, were they hydrated with water from a known safe source <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>				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)			
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Total Well Depth From Ground Surface (ft)		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			
Lower Drillhole Diameter (in.) 2.1		Casing Diameter (in.)		For Monitoring Wells and Monitoring Well Boreholes Only: <input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout <input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry			
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		Casing Depth (ft.)		No. Yards, Sacks Sealant or Volume (circle one) 0.4 sacks			
If yes, to what depth (feet)?		Depth to Water (feet)		Mix Ratio or Mud Weight			

5. Material Used to Fill Well / Drillhole	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B10H

<b>7. Supervision of Work</b>				<b>DNR Use Only</b>	
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/06/2016	Date Received	Noted By
Street or Route 1301 N 3rd St.		Telephone Number (715)392-7114		Comments	
City Superior	State WI	ZIP Code 54880	Signature of Person Doing Work 	Date Signed 7/19/16	

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 this 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 Douglas		WI Unique Well # of Removed Well ( )		Hicap #		Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)	
Latitude / Longitude (see instructions) 46.72060 ° N -92.09842 ° W		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)	
1/4 1/4 or Gov't Lot #		Section		Township		Range <input type="checkbox"/> E <input type="checkbox"/> W	
Well Street Address Belknap Street						Original Well Owner	
Well City, Village or Town Superior						Present Well Owner WisDOT NW Region	
Subdivision Name						Mailing Address of Present Owner 1701 N 4th Street	
Well ZIP Code 54880						City of Present Owner Superior	
Lot #						State WI	
ZIP Code 54880						ZIP Code 54880	

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

Reason For Removal From Service Soil Boring		WI Unique Well # of Replacement Well		Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Screen removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy) 07/06/2016		Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A If bentonite chips were used, were they hydrated with water from a known safe source <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>		If a Well Construction Report is available, please attach.		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)	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Total Well Depth From Ground Surface (ft) Lower Drillhole Diameter (in.) 2.1		Casing Diameter (in.) Casing Depth (ft.)	
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown If yes, to what depth (feet)?		Depth to Water (feet)		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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B11A

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>		
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/06/2016	Date Received	Noted By
Street or Route 1301 N 3rd St.		Telephone Number (715)392-7114		Comments	
City Superior	State WI	ZIP Code 54880	Signature of Person Doing Work 	Date Signed 7/19/16	

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 this 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 Douglas		WI Unique Well # of Removed Well ( )		Hicap #		Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)	
Latitude / Longitude (see instructions) 46.72060 ° N -92.09854 ° W		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)	
1/4 1/4 or Gov't Lot #		Section		Township		Range <input type="checkbox"/> E <input type="checkbox"/> W	
Well Street Address Belknap Street				Present Well Owner WisDOT NW Region			
Well City, Village or Town Superior				Mailing Address of Present Owner 1701 N 4th Street			
Subdivision Name				Well ZIP Code 54880		City of Present Owner Superior	
				Lot #		State WI	
						ZIP Code 54880	
4. Pump, Liner, Screen, Casing & Sealing Material							
Reason For Removal From Service Soil Boring		WI Unique Well # of Replacement Well		Pump and piping removed?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy) 07/06/2016		Liner(s) removed?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input type="checkbox"/> Water Well		If a Well Construction Report is available, please attach.		Liner(s) perforated?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input checked="" type="checkbox"/> Borehole / Drillhole				Screen removed?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>				Casing left in place?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock				Was casing cut off below surface?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Total Well Depth From Ground Surface (ft)		Casing Diameter (in.)		Did sealing material rise to surface?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Lower Drillhole Diameter (in.) 2.1		Casing Depth (ft.)		Did material settle after 24 hours?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		Depth to Water (feet)		If yes, was hole retopped?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, to what depth (feet)?				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	
5. Material Used to Fill Well / Drillhole				From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
3/8" Bentonite Chips				Surface	10.0	0.4 sacks	
6. Comments Boring B11B							
7. Supervision of Work				DNR Use Only			
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.		License #		Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/06/2016		Date Received	
Street or Route 1301 N 3rd St.		City Superior		State WI		ZIP Code 54880	
				Telephone Number (715)392-7114		Comments	
				Signature of Person Doing Work		Date Signed 7/19/16	

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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 Douglas		WI Unique Well # of Removed Well ( )		Hicap #		Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)			
Latitude / Longitude (see instructions) 46.72060 ° N -92.09825 ° W		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)			
1/4 1/4 or Gov't Lot #		Section		Township		Range <input type="checkbox"/> E <input type="checkbox"/> W		License/Permit/Monitoring #	
Well Street Address Belknap Street						Original Well Owner			
Well City, Village or Town Superior						Present Well Owner WisDOT NW Region			
Subdivision Name						Mailing Address of Present Owner 1701 N 4th Street			
Well ZIP Code 54880						City of Present Owner Superior		State WI	ZIP Code 54880
Reason For Removal From Service Soil Boring						WI Unique Well # of Replacement Well			

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

<input type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy) 07/06/2016		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input type="checkbox"/> Water Well		If a Well Construction Report is available, please attach.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input checked="" type="checkbox"/> Borehole / Drillhole				<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>				<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Total Well Depth From Ground Surface (ft)		Casing Diameter (in.)		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Lower Drillhole Diameter (in.) 2.1		Casing Depth (ft.)		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		Depth to Water (feet)		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
If yes, to what depth (feet)?				<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
 Boring B12C

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>		
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/06/2016	Date Received	Noted By
Street or Route 1301 N 3rd St.		Telephone Number (715)392-7114		Comments	
City Superior	State WI	ZIP Code 54880	Signature of Person Doing Work 	Date Signed 7/19/16	

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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 Douglas		WI Unique Well # of Removed Well ( )		Hicap #		Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)	
Latitude / Longitude (see instructions) 46.72060 ° N -92.09807 ° W		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)	
1/4 / 1/4 or Gov't Lot #		Section		Township		Range <input type="checkbox"/> E <input type="checkbox"/> W	
Well Street Address Belknap Street				Original Well Owner			
Well City, Village or Town Superior				Present Well Owner WisDOT NW Region			
Subdivision Name				Mailing Address of Present Owner 1701 N 4th Street			
Well ZIP Code 54880				City of Present Owner Superior		State WI	ZIP Code 54880
Reason For Removal From Service Soil Boring				WI Unique Well # of Replacement Well			

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

<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy) 07/06/2016		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 type="checkbox"/> No <input checked="" type="checkbox"/> N/A Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>		If a Well Construction Report is available, please attach.		Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/> No <input 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: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input 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	
Total Well Depth From Ground Surface (ft)		Casing Diameter (in.)		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	
Lower Drillhole Diameter (in.) 2.1		Casing Depth (ft.)			
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		Depth to Water (feet)			
If yes, to what depth (feet?)					

5. Material Used to Fill Well / Drillhole	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B12D

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>		
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/06/2016	Date Received	Noted By
Street or Route 1301 N 3rd St.		Telephone Number (715)392-7114		Comments	
City Superior	State WI	ZIP Code 54880	Signature of Person Doing Work 	Date Signed 7/19/16	



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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 Douglas	WI Unique Well # of Removed Well ( )	Hicap #	Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)
Latitude / Longitude (see instructions) 46.72060 ° N -92.09771 ° W	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 / 1/4      1/4	Section	Township	License/Permit/Monitoring #
or Gov't Lot #	Range <input type="checkbox"/> E <input type="checkbox"/> W		Original Well Owner
Well Street Address Belknap Street			Present Well Owner WisDOT NW Region
Well City, Village or Town Superior	Well ZIP Code 54880		Mailing Address of Present Owner 1701 N 4th Street
Subdivision Name	Lot #		City of Present Owner Superior
			State WI
			ZIP Code 54880

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

Reason For Removal From Service Soil Boring	WI Unique Well # of Replacement Well		
<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole	Original Construction Date (mm/dd/yyyy) 07/07/2016		
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>	If a Well Construction Report is available, please attach.		
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock			
Total Well Depth From Ground Surface (ft)	Casing Diameter (in.)		
Lower Drillhole Diameter (in.) 2.1	Casing Depth (ft.)		
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown			
If yes, to what depth (feet)?	Depth to Water (feet)		

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 type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" 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 checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A

Required Method of Placing Sealing Material	
<input type="checkbox"/> Conductor Pipe-Gravity	<input type="checkbox"/> Conductor Pipe-Pumped
<input 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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
 Boring B12E

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>	
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/07/2016	Date Received	Noted By
Street or Route 1301 N 3rd St.	Telephone Number (715)392-7114	Comments		
City Superior	State WI	ZIP Code 54880	Signature of Person Doing Work 	Date Signed 7/19/16

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 this 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 Douglas		WI Unique Well # of Removed Well ( )		Hicap #		Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)	
Latitude / Longitude (see instructions) 46.72073 ° N -92.09801 ° W		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)	
1/4 / 1/4 or Gov't Lot #		Section		Township		Range <input type="checkbox"/> E <input type="checkbox"/> W	
Well Street Address Belknap Street		Well City, Village or Town Superior		Well ZIP Code 54880		License/Permit/Monitoring #	
Subdivision Name		Lot #		Original Well Owner		Present Well Owner WisDOT NW Region	
Reason For Removal From Service Soil Boring		WI Unique Well # of Replacement Well		Mailing Address of Present Owner 1701 N 4th Street		City of Present Owner Superior	
Original Construction Date (mm/dd/yyyy) 07/07/2016		If a Well Construction Report is available, please attach.		State WI		ZIP Code 54880	

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

<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy) 07/07/2016  If a Well Construction Report is available, please attach.		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 type="checkbox"/> No <input checked="" type="checkbox"/> N/A Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>		Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/> No <input 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	
Total Well Depth From Ground Surface (ft) 2.1		Casing Diameter (in.)		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)	
Lower Drillhole Diameter (in.) 2.1		Casing Depth (ft.)		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	
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown If yes, to what depth (feet)?		Depth to Water (feet)		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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B12F

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>		
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/07/2016	Date Received	Noted By
Street or Route 1301 N 3rd St.		Telephone Number (715)392-7114		Comments	
City Superior	State WI	ZIP Code 54880	Signature of Person Doing Work 	Date Signed 7/19/16	

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 this 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: Douglas  
 WI Unique Well # of Removed Well: ()  
 Hicap #:   
 Latitude / Longitude (see instructions): 46.72061 ° N, -92.09617 ° W  
 Format Code:  DD,  DDM  
 Method Code:  GPS008,  SCR002,  OTH001  
 Section: 1/4, Township: 1/4, Range:  E,  W  
 Well Street Address: Belknap Street  
 Well City, Village or Town: Superior  
 Well ZIP Code: 54880  
 Subdivision Name:   
 Lot #:   
 Reason For Removal From Service: Soil Boring  
 WI Unique Well # of Replacement Well:   
 Construction Type:  Drilled,  Driven (Sandpoint),  Dug,  Other (Specify) Geoprobe  
 Formation Type:  Unconsolidated Formation,  Bedrock  
 Total Well Depth From Ground Surface (ft):   
 Casing Diameter (in.):   
 Lower Drillhole Diameter (in.): 2.1  
 Casing Depth (ft.):   
 Was well annular space grouted?  Yes,  No,  Unknown  
 If yes, to what depth (feet)?   
 Depth to Water (feet):

Facility Name: USH 2 (Belknap Street) (ID# 8680-00-01)  
 Facility ID (FID or PWS):   
 License/Permit/Monitoring #:   
 Original Well Owner:   
 Present Well Owner: WisDOT NW Region  
 Mailing Address of Present Owner: 1701 N 4th Street  
 City of Present Owner: Superior, State: WI, ZIP Code: 54880

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

Monitoring Well  
 Water Well  
 Borehole / Drillhole  
 Original Construction Date (mm/dd/yyyy): 07/06/2016  
 If a Well Construction Report is available, please attach.   
 Construction Type:  Drilled,  Driven (Sandpoint),  Dug,  Other (Specify) Geoprobe  
 Formation Type:  Unconsolidated Formation,  Bedrock  
 Total Well Depth From Ground Surface (ft):   
 Casing Diameter (in.):   
 Lower Drillhole Diameter (in.): 2.1  
 Casing Depth (ft.):   
 Was well annular space grouted?  Yes,  No,  Unknown  
 If yes, to what depth (feet)?   
 Depth to Water (feet):

**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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**

Boring B17D

**7. Supervision of Work**

Name of Person or Firm Doing Filling & Sealing: Twin Ports Testing, Inc.	License #: 54880	Date of Filling & Sealing or Verification (mm/dd/yyyy): 07/06/2016	<b>DNR Use Only</b>	
Street or Route: 1301 N 3rd St.	City: Superior	Telephone Number: (715)392-7114	Date Received:	Noted By:
State: WI	ZIP Code: 54880	Signature of Person Doing Work:	Comments:	Date Signed: 7/19/16

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 this 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 Douglas	WI Unique Well # of Removed Well ( )	Hicap #	Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)
Latitude / Longitude (see instructions) 46.72095 ° N -92.09640 ° W	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 / 1/4 or Gov't Lot #	Section	Township	License/Permit/Monitoring #
Well Street Address Belknap Street	Well City, Village or Town Superior	Well ZIP Code 54880	Original Well Owner
Subdivision Name	Lot #	City of Present Owner Superior	Present Well Owner WisDOT NW Region
Reason For Removal From Service Soil Boring	WI Unique Well # of Replacement Well	State WI	Mailing Address of Present Owner 1701 N 4th Street
		ZIP Code 54880	

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

<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole	Original Construction Date (mm/dd/yyyy) 07/07/2016	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If a Well Construction Report is available, please attach.		Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>		Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Screen removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft)	Casing Diameter (in.)	Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Lower Drillhole Diameter (in.) 2.1	Casing Depth (ft.)	Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet)	Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
If yes, to what depth (feet?)		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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A
		If bentonite chips were used, were they hydrated with water from a known safe source <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
		Required Method of Placing Sealing Material
		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped
		<input 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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B17E

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>	
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/07/2016	Date Received	Noted By
Street or Route 1301 N 3rd St.	Telephone Number (715)392-7114	Comments		
City Superior	State WI	ZIP Code 54880	Signature of Person Doing Work 	Date Signed 7/19/16

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 this 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 Douglas	WI Unique Well # of Removed Well ( )	Hicap #	Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)
Latitude / Longitude (see instructions) 46.72079 ° N -92.09639 ° W	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 / 1/4 or Gov't Lot #	Section	Township	License/Permit/Monitoring #
Well Street Address Belknap Street	Range <input type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner	Present Well Owner WisDOT NW Region
Well City, Village or Town Superior	Well ZIP Code 54880	Mailing Address of Present Owner 1701 N 4th Street	City of Present Owner Superior
Subdivision Name	Lot #	State WI	ZIP Code 54880

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

Reason For Removal From Service Soil Boring	WI Unique Well # of Replacement Well	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole	Original Construction Date (mm/dd/yyyy) 07/07/2016	Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>	If a Well Construction Report is available, please attach.	Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Screen removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft)	Casing Diameter (in.)	Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Lower Drillhole Diameter (in.) 2.1	Casing Depth (ft.)	Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
If yes, to what depth (feet)?	Depth to Water (feet)	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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A
		If bentonite chips were used, were they hydrated with water from a known safe source <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
		Required Method of Placing Sealing Material
		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input 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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
 Boring B17F

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>	
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/07/2016	Date Received	Noted By
Street or Route 1301 N 3rd St.	Telephone Number (715)392-7114	Signature of Person Doing Work	Comments	
City Superior	State WI	ZIP Code 54880	Date Signed 7/19/16	



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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 Douglas	WI Unique Well # of Removed Well ( )	Hicap #	Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)
Latitude / Longitude (see instructions) 46.72050 ° N -92.09347 ° W	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 / 1/4 or Gov't Lot #	Section	Township	License/Permit/Monitoring #
Well Street Address Belknap Street	Well ZIP Code 54880	Range <input type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner
Well City, Village or Town Superior	Well ZIP Code 54880	City of Present Owner Superior	Present Well Owner WisDOT NW Region
Subdivision Name	Lot #	State WI	Mailing Address of Present Owner 1701 N 4th Street
Reason For Removal From Service Soil Boring	WI Unique Well # of Replacement Well	City of Present Owner Superior	State WI
		ZIP Code 54880	

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

<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole	Original Construction Date (mm/dd/yyyy) 07/07/2016	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>	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
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft)	Casing Diameter (in.)	Screen removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Lower Drillhole Diameter (in.) 2.1	Casing Depth (ft.)	Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet)	Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If yes, to what depth (feet?)		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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A
		If bentonite chips were used, were they hydrated with water from a known safe source <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
		Required Method of Placing Sealing Material
		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input 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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
 Boring B19D

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>	
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/07/2016	Date Received	Noted By
Street or Route 1301 N 3rd St.	City Superior	State WI	Telephone Number (715)392-7114	Comments
City Superior	State WI	ZIP Code 54880	Signature of Person Doing Work 	Date Signed 7/19/16

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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 Douglas		WI Unique Well # of Removed Well ( )		Hicap #		Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)			
Latitude / Longitude (see instructions) 46.72058 ° N -92.09380 ° W		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)			
1/4 / 1/4		Section		Township		Range <input type="checkbox"/> E <input type="checkbox"/> W		License/Permit/Monitoring #	
or Gov't Lot #		Well Street Address Belknap Street		Well City, Village or Town Superior		Well ZIP Code 54880		Original Well Owner	
Subdivision Name		Well ZIP Code 54880		Lot #		City of Present Owner Superior		State WI	
Reason For Removal From Service Soil Boring		WI Unique Well # of Replacement Well		Mailing Address of Present Owner 1701 N 4th Street		City of Present Owner Superior		State WI	
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>		Original Construction Date (mm/dd/yyyy) 07/07/2016		If a Well Construction Report is available, please attach.		City of Present Owner Superior		ZIP Code 54880	

**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 type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input 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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B19E

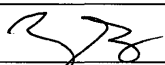
<b>7. Supervision of Work</b>			<b>DNR Use Only</b>		
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/07/2016	Date Received	Noted By
Street or Route 1301 N 3rd St.		Telephone Number (715)392-7114		Comments	
City Superior	State WI	ZIP Code 54880	Signature of Person Doing Work 	Date Signed 7/19/16	

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 this 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 <b>Douglas</b>		WI Unique Well # of Removed Well <b>()</b>		Hicap #		Facility Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			
Latitude / Longitude (see instructions) <b>46.72061 ° N</b> <b>-92.09413 ° W</b>		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)			
1/4 / 1/4 or Gov't Lot #		Section		Township		Range <input type="checkbox"/> E <input type="checkbox"/> W			
Well Street Address <b>Belknap Street</b>				Present Well Owner <b>WisDOT NW Region</b>					
Well City, Village or Town <b>Superior</b>				Mailing Address of Present Owner <b>1701 N 4th Street</b>					
Subdivision Name				Well ZIP Code <b>54880</b>		City of Present Owner <b>Superior</b>			
Reason For Removal From Service <b>Soil Boring</b>				WI Unique Well # of Replacement Well		State <b>WI</b>			
3. Filled & Sealed Well / Drillhole / Borehole Information				4. Pump, Liner, Screen, Casing & Sealing Material					
<input type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy) <b>07/07/2016</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 checked="" type="checkbox"/> Borehole / Drillhole				Liner(s) perforated?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <b>Geoprobe</b>				Screen removed?				<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock				Casing left in place?				<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Total Well Depth From Ground Surface (ft)		Casing Diameter (in.)		Was casing cut off below surface?				<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Lower Drillhole Diameter (in.) <b>2.1</b>		Casing Depth (ft.)		Did sealing material rise to surface?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown				Did material settle after 24 hours?				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, to what depth (feet)?		Depth to Water (feet)		If yes, was hole retopped?				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input 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	
5. Material Used to Fill Well / Drillhole				Required Method of Placing Sealing Material					
				<input type="checkbox"/> Conductor Pipe-Gravity		<input type="checkbox"/> Conductor Pipe-Pumped			
<b>3/8" Bentonite Chips</b>		<b>Surface</b>		<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips)		<input type="checkbox"/> Other (Explain)			
		<b>10.0</b>		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					
				No. Yards, Sacks Sealant or Volume (circle one)		Mix Ratio or Mud Weight			
				<b>0.4 sacks</b>					
6. Comments									
<b>Boring B19F</b>									
7. Supervision of Work				DNR Use Only					
Name of Person or Firm Doing Filling & Sealing <b>Twin Ports Testing, Inc.</b>		License #		Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>07/07/2016</b>		Date Received			
Street or Route <b>1301 N 3rd St.</b>		City <b>Superior</b>		Telephone Number <b>(715)392-7114</b>		Noted By			
State <b>WI</b>		ZIP Code <b>54880</b>		Signature of Person Doing Work 		Comments			
						Date Signed <b>7/19/16</b>			

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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 <b>Douglas</b>	WI Unique Well # of Removed Well <b>()</b>	Hicap #	Facility Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>
Latitude / Longitude (see instructions) <b>46.72052 ° N</b> <b>-92.09418 ° W</b>	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 / 1/4 or Gov't Lot #	Section	Township	License/Permit/Monitoring #
Well Street Address <b>Belknap Street</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner	Present Well Owner <b>WisDOT NW Region</b>
Well City, Village or Town <b>Superior</b>	Well ZIP Code <b>54880</b>	Mailing Address of Present Owner <b>1701 N 4th Street</b>	City of Present Owner <b>Superior</b>
Subdivision Name	Lot #	State <b>WI</b>	ZIP Code <b>54880</b>

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

Reason For Removal From Service <b>Soil Boring</b>	WI Unique Well # of Replacement Well	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>07/07/2016</b>	Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.	Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input checked="" type="checkbox"/> Borehole / Drillhole	Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <b>Geoprobe</b>	Screen removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft)	Casing Diameter (in.)	Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Lower Drillhole Diameter (in.) <b>2.1</b>	Casing Depth (ft.)	Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet)	Did material settle after 24 hours? If yes, was hole retopped? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
If yes, to what depth (feet?)	Depth to Water (feet)	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. Filled & Sealed Well / Drillhole / Borehole Information**

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

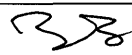
**5. Material Used to Fill Well / Drillhole**

	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**

Boring B19G

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

Name of Person or Firm Doing Filling & Sealing <b>Twin Ports Testing, Inc.</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>07/07/2016</b>	Date Received	Noted By
Street or Route <b>1301 N 3rd St.</b>	City <b>Superior</b>	State <b>WI</b>	ZIP Code <b>54880</b>	Telephone Number <b>(715)392-7114</b>
Signature of Person Doing Work 			Comments	
Date Signed <b>7/19/16</b>				

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 this 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: Douglas  
 WI Unique Well # of Removed Well: ()  
 Hicap #:   
 Latitude / Longitude (see instructions): 46.72058 ° N, -92.09278 ° W  
 Format Code:  DD,  DDM  
 Method Code:  GPS008,  SCR002,  OTH001  
 Section: 1/4, Township: 1/4, Range:  E,  W  
 Well Street Address: Belknap Street  
 Well City, Village or Town: Superior  
 Well ZIP Code: 54880  
 Subdivision Name:   
 Lot #:   
 Reason For Removal From Service: Soil Boring  
 WI Unique Well # of Replacement Well:   
 If a Well Construction Report is available, please attach.

Facility Name: USH 2 (Belknap Street) (ID# 8680-00-01)  
 Facility ID (FID or PWS):   
 License/Permit/Monitoring #:   
 Original Well Owner:   
 Present Well Owner: WisDOT NW Region  
 Mailing Address of Present Owner: 1701 N 4th Street  
 City of Present Owner: Superior, State: WI, ZIP Code: 54880

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

Monitoring Well  
 Water Well  
 Borehole / Drillhole  
 Original Construction Date (mm/dd/yyyy): 07/07/2016  
 Construction Type:  Drilled,  Driven (Sandpoint),  Dug,  Other (Specify) Geoprobe  
 Formation Type:  Unconsolidated Formation,  Bedrock  
 Total Well Depth From Ground Surface (ft):   
 Casing Diameter (in.):   
 Lower Drillhole Diameter (in.): 2.1  
 Casing Depth (ft.):   
 Was well annular space grouted?  Yes,  No,  Unknown  
 If yes, to what depth (feet)?   
 Depth to Water (feet):

**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**

Material	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**

Boring B20F

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

Name of Person or Firm Doing Filling & Sealing: Twin Ports Testing, Inc. License #:   
 Date of Filling & Sealing or Verification (mm/dd/yyyy): 07/07/2016 Date Received:   
 Street or Route: 1301 N 3rd St. Telephone Number: (715)392-7114 Comments:   
 City: Superior State: WI ZIP Code: 54880 Signature of Person Doing Work: [Signature] Date Signed: 7/19/16



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 this 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 Douglas	WI Unique Well # of Removed Well ( )	Hicap #	Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)
Latitude / Longitude (see instructions) 46.72044 ° N -92.09094 ° W	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 / 1/4      1/4	Section	Township	License/Permit/Monitoring #
or Gov't Lot #		Range <input type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner
Well Street Address Belknap Street	Well ZIP Code 54880		Present Well Owner WisDOT NW Region
Well City, Village or Town Superior	Well ZIP Code 54880		Mailing Address of Present Owner 1701 N 4th Street
Subdivision Name	Lot #	City of Present Owner Superior	State WI
		ZIP Code 54880	

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

Reason For Removal From Service Soil Boring	WI Unique Well # of Replacement Well	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 07/07/2016	Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.	Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input checked="" type="checkbox"/> Borehole / Drillhole		Screen removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>		Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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)	Casing Diameter (in.)	Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Lower Drillhole Diameter (in.) 2.1	Casing Depth (ft.)	If yes, was hole retopped? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		If bentonite chips were used, were they hydrated with water from a known safe source <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If yes, to what depth (feet)?	Depth to Water (feet)	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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B22G

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>	
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/07/2016	Date Received	Noted By
Street or Route 1301 N 3rd St.	Telephone Number (715)392-7114		Comments	
City Superior	State WI	ZIP Code 54880	Signature of Person Doing Work 	Date Signed 7/19/16

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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 <b>Douglas</b>	WI Unique Well # of Removed Well <b>()</b>	Hicap #	Facility Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>
Latitude / Longitude (see instructions) <b>46.72025 ° N</b> <b>-92.09093 ° W</b>	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 / 1/4 or Gov't Lot #	Section	Township	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>Belknap Street</b>			Original Well Owner
Well City, Village or Town <b>Superior</b>			Present Well Owner <b>WisDOT NW Region</b>
Subdivision Name			Mailing Address of Present Owner <b>1701 N 4th Street</b>
Well ZIP Code <b>54880</b>			City of Present Owner <b>Superior</b>
Lot #			State <b>WI</b>
Reason For Removal From Service <b>Soil Boring</b>			ZIP Code <b>54880</b>
WI Unique Well # of Replacement Well			

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

<input type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>07/07/2016</b>
<input type="checkbox"/> Water Well	
<input checked="" type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <b>Geoprobe</b>	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft)	Casing Diameter (in.)
Lower Drillhole Diameter (in.) <b>2.1</b>	Casing Depth (ft.)
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet)

**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 type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" 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 checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Required Method of Placing Sealing Material			
<input type="checkbox"/> Conductor Pipe-Gravity	<input type="checkbox"/> Conductor Pipe-Pumped		
<input 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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B22H

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>	
Name of Person or Firm Doing Filling & Sealing <b>Twin Ports Testing, Inc.</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>07/07/2016</b>	Date Received	Noted By
Street or Route <b>1301 N 3rd St.</b>	Telephone Number <b>(715)392-7114</b>		Comments	
City <b>Superior</b>	State <b>WI</b>	ZIP Code <b>54880</b>	Signature of Person Doing Work 	Date Signed <b>7/19/16</b>

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 this 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 Douglas	WI Unique Well # of Removed Well ( )	Hicap #
Latitude / Longitude (see instructions) 46.72059 ° N -92.09126 ° W	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001
1/4 / 1/4 or Gov't Lot #	Section	Township
Well Street Address Belknap Street	Well ZIP Code 54880	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well City, Village or Town Superior	Well ZIP Code 54880	
Subdivision Name	Lot #	
Reason For Removal From Service Soil Boring	WI Unique Well # of Replacement Well	

**2. Facility / Owner Information**

Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)
Facility ID (FID or PWS)
License/Permit/Monitoring #
Original Well Owner
Present Well Owner WisDOT NW Region
Mailing Address of Present Owner 1701 N 4th Street
City of Present Owner Superior
State WI
ZIP Code 54880

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

<input type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 07/07/2016
<input type="checkbox"/> Water Well	
<input checked="" type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft)	Casing Diameter (in.)
Lower Drillhole Diameter (in.) 2.1	Casing Depth (ft.)
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet)

**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 type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" 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 checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Required Method of Placing Sealing Material			
<input type="checkbox"/> Conductor Pipe-Gravity	<input type="checkbox"/> Conductor Pipe-Pumped		
<input 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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**

Boring B22I

**7. Supervision of Work**

Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/07/2016	DNR Use Only	
Street or Route 1301 N 3rd St.	City Superior	State WI	ZIP Code 54880	Date Received Noted By
Telephone Number (715)392-7114	Signature of Person Doing Work 	Comments	Date Signed 7/12/16	

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 this 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**

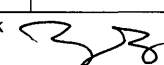
County Douglas		WI Unique Well # of Removed Well ( )		Hicap #		Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)			
Latitude / Longitude (see instructions) 46.72058 ° N -92.09095 ° W		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)			
1/4 / 1/4		Section		Township		Range <input type="checkbox"/> E <input type="checkbox"/> W		License/Permit/Monitoring #	
or Gov't Lot #		Well Street Address Belknap Street		Well City, Village or Town Superior		Well ZIP Code 54880		Original Well Owner	
Subdivision Name		Well Street Address Belknap Street		Well City, Village or Town Superior		Well ZIP Code 54880		Present Well Owner WisDOT NW Region	
Reason For Removal From Service Soil Boring		WI Unique Well # of Replacement Well		Well ZIP Code 54880		City of Present Owner Superior		Mailing Address of Present Owner 1701 N 4th Street	
Subdivision Name		Well Street Address Belknap Street		Well City, Village or Town Superior		Well ZIP Code 54880		City of Present Owner Superior	
Subdivision Name		Well Street Address Belknap Street		Well City, Village or Town Superior		Well ZIP Code 54880		City of Present Owner Superior	

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

<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy) 07/07/2016  If a Well Construction Report is available, please attach.		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 type="checkbox"/> No <input checked="" type="checkbox"/> N/A Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>		Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/> No <input 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	
Total Well Depth From Ground Surface (ft) Lower Drillhole Diameter (in.) 2.1		Casing Diameter (in.) Casing Depth (ft.)		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)	
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown If yes, to what depth (feet)?		Depth to Water (feet)		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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B22J

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/07/2016	Date Received	Noted By
Street or Route 1301 N 3rd St.		Telephone Number (715)392-7114		Comments	
City Superior	State WI	ZIP Code 54880	Signature of Person Doing Work 	Date Signed 7/19/16	

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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**

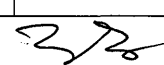
County <b>Douglas</b>	WI Unique Well # of Removed Well <b>()</b>	Hicap #	Facility Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>
Latitude / Longitude (see instructions) <b>46.72058 ° N</b> <b>-92.09107 ° W</b>	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 / 1/4 or Gov't Lot #	Section	Township	License/Permit/Monitoring #
Well Street Address <b>Belknap Street</b>	Well City, Village or Town <b>Superior</b>	Well ZIP Code <b>54880</b>	Original Well Owner
Subdivision Name	Lot #	City of Present Owner <b>Superior</b>	Present Well Owner <b>WisDOT NW Region</b>
Reason For Removal From Service <b>Soil Boring</b>	WI Unique Well # of Replacement Well	State <b>WI</b>	Mailing Address of Present Owner <b>1701 N 4th Street</b>
		ZIP Code <b>54880</b>	

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

<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole	Original Construction Date (mm/dd/yyyy) <b>07/07/2016</b>	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If a Well Construction Report is available, please attach.		Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <b>Geoprobe</b>		Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Screen removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft)	Casing Diameter (in.)	Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Lower Drillhole Diameter (in.) <b>2.1</b>	Casing Depth (ft.)	Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet)	Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
If yes, to what depth (feet)?		Did material settle after 24 hours? If yes, was hole retopped? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
		If bentonite chips were used, were they hydrated with water from a known safe source <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
		Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input 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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
 Boring B22K

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>	
Name of Person or Firm Doing Filling & Sealing <b>Twin Ports Testing, Inc.</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>07/07/2016</b>	Date Received	Noted By
Street or Route <b>1301 N 3rd St.</b>	City <b>Superior</b>	State <b>WI</b>	Telephone Number <b>(715)392-7114</b>	Comments
City <b>Superior</b>	State <b>WI</b>	ZIP Code <b>54880</b>	Signature of Person Doing Work 	Date Signed <b>7/19/16</b>

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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**

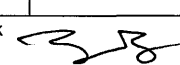
County <b>Douglas</b>	WI Unique Well # of Removed Well <b>()</b>	Hicap #	Facility Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>
Latitude / Longitude (see instructions) <b>46.72058 ° N</b> <b>-92.08869 ° W</b>	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 / 1/4 or Gov't Lot #	Section	Township	License/Permit/Monitoring #
Well Street Address <b>Belknap Street</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner	Present Well Owner <b>WisDOT NW Region</b>
Well City, Village or Town <b>Superior</b>	Well ZIP Code <b>54880</b>	Mailing Address of Present Owner <b>1701 N 4th Street</b>	City of Present Owner <b>Superior</b>
Subdivision Name	Lot #	State <b>WI</b>	ZIP Code <b>54880</b>

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

Reason For Removal From Service <b>Soil Boring</b>	WI Unique Well # of Replacement Well	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>07/07/2016</b>	Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.	Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input checked="" type="checkbox"/> Borehole / Drillhole		Screen removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <b>Geoprobe</b>		Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft)	Casing Diameter (in.)	Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Lower Drillhole Diameter (in.) <b>2.1</b>	Casing Depth (ft.)	Did material settle after 24 hours? If yes, was hole retopped? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet)	If bentonite chips were used, were they hydrated with water from a known safe source <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input 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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
 Boring B26D

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>	
Name of Person or Firm Doing Filling & Sealing <b>Twin Ports Testing, Inc.</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>07/07/2016</b>	Date Received	Noted By
Street or Route <b>1301 N 3rd St.</b>	City <b>Superior</b>	State <b>WI</b>	Telephone Number <b>(715)392-7114</b>	Comments
City <b>Superior</b>	State <b>WI</b>	ZIP Code <b>54880</b>	Signature of Person Doing Work 	Date Signed <b>7/19/16</b>



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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: Douglas  
 WI Unique Well # of Removed Well: ()  
 Hicap #:   
 Latitude / Longitude (see instructions): 46.72057 ° N, -92.08836 ° W  
 Format Code:  DD,  DDM  
 Method Code:  GPS008,  SCR002,  OTH001  
 Section:   
 Township:   
 Range:  E,  W  
 Well Street Address: Belknap Street  
 Well City, Village or Town: Superior  
 Well ZIP Code: 54880  
 Subdivision Name:   
 Lot #:   
 Reason For Removal From Service: Soil Boring  
 WI Unique Well # of Replacement Well:   
 Original Construction Date (mm/dd/yyyy): 07/07/2016  
 If a Well Construction Report is available, please attach.

Facility Name: USH 2 (Belknap Street) (ID# 8680-00-01)  
 Facility ID (FID or PWS):   
 License/Permit/Monitoring #:   
 Original Well Owner:   
 Present Well Owner: WisDOT NW Region  
 Mailing Address of Present Owner: 1701 N 4th Street  
 City of Present Owner: Superior, WI  
 State: WI, ZIP Code: 54880

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

Monitoring Well  
 Water Well  
 Borehole / Drillhole  
 Construction Type:  
 Drilled       Driven (Sandpoint)       Dug  
 Other (Specify) Geoprobe  
 Formation Type:  
 Unconsolidated Formation       Bedrock  
 Total Well Depth From Ground Surface (ft):   
 Casing Diameter (in.):   
 Lower Drillhole Diameter (in.): 2.1  
 Casing Depth (ft.):   
 Was well annular space grouted?  Yes  No  Unknown  
 If yes, to what depth (feet)?   
 Depth to Water (feet):

**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)

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

Material	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**

Boring B27A

**7. Supervision of Work**

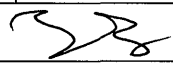
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/07/2016	DNR Use Only	
Street or Route 1301 N 3rd St.		Telephone Number (715)392-7114		Date Received	Noted By
City Superior	State WI	ZIP Code 54880	Signature of Person Doing Work 	Date Signed 7/12/2016	

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 this 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

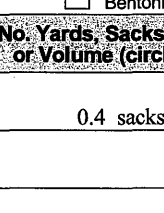
1. Well Location Information				2. Facility / Owner Information			
County <b>Douglas</b>		WI Unique Well # of Removed Well <b>()</b>		Hicap #		Facility Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>	
Latitude / Longitude (see instructions) <b>46.72057 ° N</b> <b>-92.08769 ° W</b>		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)	
1/4 / 1/4 or Gov't Lot #		Section		Township		Range <input type="checkbox"/> E <input type="checkbox"/> W	
Well Street Address <b>Belknap Street</b>				Present Well Owner <b>WisDOT NW Region</b>			
Well City, Village or Town <b>Superior</b>				Mailing Address of Present Owner <b>1701 N 4th Street</b>			
Subdivision Name				Well ZIP Code <b>54880</b>		City of Present Owner <b>Superior</b>	
				Lot #		State <b>WI</b>	
						ZIP Code <b>54880</b>	
4. Pump, Liner, Screen, Casing & Sealing Material							
Reason For Removal From Service <b>Soil Boring</b>		WI Unique Well # of Replacement Well		Pump and piping removed?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy) <b>07/07/2016</b>		Liner(s) removed?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input type="checkbox"/> Water Well		If a Well Construction Report is available, please attach.		Liner(s) perforated?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input checked="" type="checkbox"/> Borehole / Drillhole				Screen removed?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Construction Type:				Casing left in place?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input type="checkbox"/> Drilled		<input type="checkbox"/> Driven (Sandpoint)		<input type="checkbox"/> Dug			
<input checked="" type="checkbox"/> Other (Specify) <b>Geoprobe</b>				Was casing cut off below surface?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Formation 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"/> Unconsolidated Formation		<input type="checkbox"/> Bedrock		Did material settle after 24 hours?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Total Well Depth From Ground Surface (ft)		Casing Diameter (in.)		If yes, was hole retopped?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Lower Drillhole Diameter (in.)		Casing Depth (ft.)		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	
2.1				Required Method of Placing Sealing Material			
Was well annular space grouted?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		<input type="checkbox"/> Conductor Pipe-Gravity		<input type="checkbox"/> Conductor Pipe-Pumped	
If yes, to what depth (feet)?		Depth to Water (feet)		<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	
5. Material Used to Fill Well / Drillhole				From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
3/8" Bentonite Chips				Surface	10.0	0.4 sacks	
6. Comments							
Boring B28F							
7. Supervision of Work				DNR Use Only			
Name of Person or Firm Doing Filling & Sealing <b>Twin Ports Testing, Inc.</b>			License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>07/07/2016</b>		Date Received	Noted By
Street or Route <b>1301 N 3rd St.</b>			Telephone Number <b>(715)392-7114</b>		Comments		
City <b>Superior</b>		State <b>WI</b>	ZIP Code <b>54880</b>	Signature of Person Doing Work 			Date Signed <b>7/19/16</b>

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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 <b>Douglas</b>		WI Unique Well # of Removed Well <b>()</b>		Hicap #		Facility Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>	
Latitude / Longitude (see instructions) <b>46.72057 ° N</b> <b>-92.08797 ° W</b>		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)	
1/4 1/4 or Gov't Lot #		Section		Township		License/Permit/Monitoring #	
Well Street Address <b>Belknap Street</b>		Well City, Village or Town <b>Superior</b>		Well ZIP Code <b>54880</b>		Original Well Owner	
Subdivision Name		Lot #		City of Present Owner <b>Superior</b>		State <b>WI</b>	
Reason For Removal From Service <b>Soil Boring</b>		WI Unique Well # of Replacement Well		Mailing Address of Present Owner <b>1701 N 4th Street</b>		ZIP Code <b>54880</b>	
4. Pump, Liner, Screen, Casing & Sealing Material							
<input type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy) <b>07/07/2016</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 checked="" type="checkbox"/> Borehole / Drillhole		Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <b>Geoprobe</b>		Liner(s) perforated?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Total Well Depth From Ground Surface (ft)		Casing Diameter (in.)		Screen removed?	
Lower Drillhole Diameter (in.) <b>2.1</b>		Casing Depth (ft.)		Casing left in place?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		Depth to Water (feet)		Did sealing material rise to surface?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, to what depth (feet)?		Depth to Water (feet)		Did material settle after 24 hours? If yes, was hole retopped?		<input type="checkbox"/> Yes <input checked="" 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)	
3/8" Bentonite Chips		Surface		10.0		0.4 sacks	
6. Comments <b>Boring B28G</b>		7. Supervision of Work		DNR Use Only		Date Received	
Name of Person or Firm Doing Filling & Sealing <b>Twin Ports Testing, Inc.</b>		License #		Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>07/07/2016</b>		Noted By	
Street or Route <b>1301 N 3rd St.</b>		City <b>Superior</b>		State <b>WI</b>		ZIP Code <b>54880</b>	
Telephone Number <b>(715)392-7114</b>		Signature of Person Doing Work 		Comments		Date Signed <b>7/19/16</b>	

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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 <b>Douglas</b>	WI Unique Well # of Removed Well <b>()</b>	Hicap #	Facility Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>
Latitude / Longitude (see instructions) <b>46.72044 ° N</b> <b>-92.08760 ° W</b>	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 / 1/4 or Gov't Lot #	Section	Township	License/Permit/Monitoring #
Well Street Address <b>Belknap Street</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner	Present Well Owner <b>WisDOT NW Region</b>
Well City, Village or Town <b>Superior</b>	Well ZIP Code <b>54880</b>	Mailing Address of Present Owner <b>1701 N 4th Street</b>	City of Present Owner <b>Superior</b>
Subdivision Name	Lot #	State <b>WI</b>	ZIP Code <b>54880</b>
Reason For Removal From Service <b>Soil Boring</b>	WI Unique Well # of Replacement Well	<b>4: Pump, Liner, Screen, Casing &amp; Sealing Material</b>	

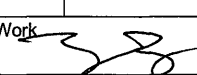
**3: Filled & Sealed Well / Drillhole / Borehole Information**

<input type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>07/07/2016</b>
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.
<input checked="" type="checkbox"/> Borehole / Drillhole	
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <b>Geoprobe</b>	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft)	Casing Diameter (in.)
Lower Drillhole Diameter (in.) <b>2.1</b>	Casing Depth (ft.)
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet)
If yes, to what depth (feet)?	

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 type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" 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 checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Required Method of Placing Sealing Material			
<input type="checkbox"/> Conductor Pipe-Gravity	<input type="checkbox"/> Conductor Pipe-Pumped		
<input 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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B28H

<b>7: Supervision of Work</b>			<b>DNR Use Only</b>	
Name of Person or Firm Doing Filling & Sealing <b>Twin Ports Testing, Inc.</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>07/07/2016</b>	Date Received	Noted By
Street or Route <b>1301 N 3rd St.</b>	City <b>Superior</b>	State <b>WI</b>	ZIP Code <b>54880</b>	Telephone Number <b>(715)392-7114</b>
Signature of Person Doing Work 			Comments <b>7/19/16</b>	

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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 Douglas	WI Unique Well # of Removed Well ( )	Hicap #	Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)
Latitude / Longitude (see instructions) 46.72028 ° N -92.08759 ° W	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 / 1/4 or Gov't Lot #	Section	Township	License/Permit/Monitoring #
Well Street Address Belknap Street	Well ZIP Code 54880	Range <input type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner
Well City, Village or Town Superior	Well ZIP Code 54880	City of Present Owner Superior	Present Well Owner WisDOT NW Region
Subdivision Name	Lot #	State WI	Mailing Address of Present Owner 1701 N 4th Street
Reason For Removal From Service Soil Boring	WI Unique Well # of Replacement Well	City of Present Owner Superior	State WI
		ZIP Code 54880	

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

<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole	Original Construction Date (mm/dd/yyyy) 07/07/2016	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 type="checkbox"/> No <input checked="" type="checkbox"/> N/A Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>	If a Well Construction Report is available, please attach.	Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/> No <input 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: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	Total Well Depth From Ground Surface (ft) 2.1	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)
Lower Drillhole Diameter (in.) 2.1	Casing Diameter (in.)	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
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet)	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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B28I

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>	
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/07/2016	Date Received	Noted By
Street or Route 1301 N 3rd St.	City Superior	Telephone Number (715)392-7114	Comments	
State WI	ZIP Code 54880	Signature of Person Doing Work 	Date Signed 7/19/16	





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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 Douglas	WI Unique Well # of Removed Well ( )	Hicap #	Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)
Latitude / Longitude (see instructions) 46.72076 ° N -92.08756 ° W	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 / 1/4 or Gov't Lot #	Section	Township	License/Permit/Monitoring #
Well Street Address Belknap Street	Well ZIP Code 54880	Range <input type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner
Well City, Village or Town Superior	Well ZIP Code 54880	City of Present Owner Superior	Present Well Owner WisDOT NW Region
Subdivision Name	Lot #	State WI	Mailing Address of Present Owner 1701 N 4th Street
Reason For Removal From Service Soil Boring	WI Unique Well # of Replacement Well	City of Present Owner Superior	ZIP Code 54880

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

<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole	Original Construction Date (mm/dd/yyyy) 07/07/2016	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>	If a Well Construction Report is available, please attach.	<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)
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	Total Well Depth From Ground Surface (ft)	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
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown If yes, to what depth (feet)?	Casing Diameter (in.)	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
Lower Drillhole Diameter (in.) 2.1	Casing Depth (ft.)	

5. Material Used to Fill Well / Drillhole	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
 Boring B28K

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>	
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/07/2016	Date Received	Noted By
Street or Route 1301 N 3rd St.	City Superior	State WI	Telephone Number (715)392-7114	Comments
City Superior	State WI	ZIP Code 54880	Signature of Person Doing Work 	Date Signed 7/14/16

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 this 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 <b>Douglas</b>		WI Unique Well # of Removed Well <b>()</b>		Hicap #		Facility Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			
Latitude / Longitude (see instructions) <b>46.72085 ° N</b> <b>-92.08756 ° W</b>		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)			
¼ / ¼		Section		Township		Range <input type="checkbox"/> E <input type="checkbox"/> W		License/Permit/Monitoring #	
or Gov't Lot #		Well Street Address <b>Belknap Street</b>		Well City, Village or Town <b>Superior</b>		Well ZIP Code <b>54880</b>		Original Well Owner	
Subdivision Name		Well ZIP Code <b>54880</b>		Lot #		City of Present Owner <b>Superior</b>		State <b>WI</b>	
Reason For Removal From Service <b>Soil Boring</b>		WI Unique Well # of Replacement Well		City of Present Owner <b>Superior</b>		State <b>WI</b>		ZIP Code <b>54880</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 type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Required Method of Placing Sealing Material	
<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain)	

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

<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy) <b>07/07/2016</b>	
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <b>Geoprobe</b>		If a Well Construction Report is available, please attach.	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock			
Total Well Depth From Ground Surface (ft.)		Casing Diameter (in.)	
Lower Drillhole Diameter (in.) <b>2.1</b>		Casing Depth (ft.)	
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown			
If yes, to what depth (feet)?		Depth to Water (feet)	

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

	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**

Boring B28L

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

Name of Person or Firm Doing Filling & Sealing <b>Twin Ports Testing, Inc.</b>		License #		Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>07/07/2016</b>		Date Received		Noted By	
Street or Route <b>1301 N 3rd St.</b>		City <b>Superior</b>		Telephone Number <b>(715)392-7114</b>		Signature of Person Doing Work 		Comments	
State <b>WI</b>		ZIP Code <b>54880</b>		Date Signed <b>7/19/16</b>					

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 this 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

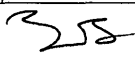
1. Well Location Information				2. Facility / Owner Information			
County Douglas		WI Unique Well # of Removed Well ( )		Hicap #		Facility Name USH 2 (Belknap Street) (ID# 8680-00-01)	
Latitude / Longitude (see instructions) 46.72057 ° N -92.07739 ° W		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)	
1/4 1/4 or Gov't Lot #		Section		Township		License/Permit/Monitoring #	
Well Street Address Belknap Street		Well ZIP Code 54880		Original Well Owner		Present Well Owner WisDOT NW Region	
Subdivision Name		Lot #		City of Present Owner Superior		State WI	
Reason For Removal From Service Soil Boring		WI Unique Well # of Replacement Well		City of Present Owner Superior		ZIP Code 54880	
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 type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Casing left in place?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A		Was casing cut off below surface?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A		If bentonite chips were used, were they hydrated with water from a known safe source		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u>Geoprobe</u>		Original Construction Date (mm/dd/yyyy) 07/07/2016		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	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		If a Well Construction Report is available, please attach.		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		Total Well Depth From Ground Surface (ft)	
Casing Diameter (in.)		Casing Depth (ft.)		5. Material Used to Fill Well / Drillhole		From (ft.)	
Lower Drillhole Diameter (in.) 2.1		Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		3/8" Bentonite Chips		To (ft.)	
If yes, to what depth (feet)?		Depth to Water (feet)				No. Yards, Sacks Sealant or Volume (circle one)	
						0.4 sacks	
						Mix Ratio or Mud Weight	
6. Comments							
Boring B36P							
7. Supervision of Work				DNR Use Only			
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.		License #		Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/07/2016		Date Received	
Street or Route 1301 N 3rd St.		City Superior		State WI		ZIP Code 54880	
Telephone Number (715)392-7114		Signature of Person Doing Work 		Comments		Noted By	
Date Signed 7/19/16							

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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 <b>Douglas</b>		WI Unique Well # of Removed Well <b>()</b>		Hicap #		Facility Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>	
Latitude / Longitude (see instructions) <b>46.72061 ° N</b> <b>-92.10242 ° W</b>		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)	
1/4 / 1/4 or Gov't Lot #		Section		Township		Range <input type="checkbox"/> E <input type="checkbox"/> W	
Well Street Address <b>Belknap Street</b>				Present Well Owner <b>WisDOT NW Region</b>			
Well City, Village or Town <b>Superior</b>				Mailing Address of Present Owner <b>1701 N 4th Street</b>			
Subdivision Name				Well ZIP Code <b>54880</b>		City of Present Owner <b>Superior</b>	
				Lot #		State <b>WI</b>	
						ZIP Code <b>54880</b>	
4: Pump, Liner, Screen, Casing & Sealing Material							
Reason For Removal From Service <b>Soil Boring</b>		WI Unique Well # of Replacement Well					
<input type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy) <b>07/06/2016</b>					
<input type="checkbox"/> Water Well		If a Well Construction Report is available, please attach.					
<input checked="" type="checkbox"/> Borehole / Drillhole							
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <b>Geoprobe</b>							
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock							
Total Well Depth From Ground Surface (ft)				Casing Diameter (in.)			
Lower Drillhole Diameter (in.) <b>2.1</b>				Casing Depth (ft.)			
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown							
If yes, to what depth (feet)?				Depth to Water (feet)			
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 type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Casing left in place?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A		Was casing cut off below surface?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A		If bentonite chips were used, were they hydrated with water from a known safe source		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input 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
3/8" Bentonite Chips				Surface	10.0	0.4 sacks	
<b>6. Comments</b>							
Boring B5D							
7: Supervision of Work						DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <b>Twin Ports Testing, Inc.</b>			License #		Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>07/06/2016</b>		Date Received
Street or Route <b>1301 N 3rd St.</b>			City <b>Superior</b>		Telephone Number <b>(715)392-7114</b>		Noted By
State <b>WI</b>			ZIP Code <b>54880</b>		Signature of Person Doing Work 		Date Signed <b>7/19/16</b>

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 this 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: Douglas  
 WI Unique Well # of Removed Well: ()  
 Hicap #:   
 Latitude / Longitude (see instructions): 46.72061 ° N, -92.10217 ° W  
 Format Code:  DD,  DDM  
 Method Code:  GPS008,  SCR002,  OTH001  
 Section:   
 Township:   
 Range:  E,  W  
 Well Street Address: Belknap Street  
 Well City, Village or Town: Superior  
 Well ZIP Code: 54880  
 Subdivision Name:   
 Lot #:   
 Reason For Removal From Service: Soil Boring  
 WI Unique Well # of Replacement Well:   
 Original Construction Date (mm/dd/yyyy): 07/06/2016  
 If a Well Construction Report is available, please attach.   
 Construction Type:  Drilled,  Driven (Sandpoint),  Dug,  Other (Specify) Geoprobe  
 Formation Type:  Unconsolidated Formation,  Bedrock  
 Total Well Depth From Ground Surface (ft):   
 Casing Diameter (in.):   
 Lower Drillhole Diameter (in.): 2.1  
 Casing Depth (ft.):   
 Was well annular space grouted?  Yes,  No,  Unknown  
 If yes, to what depth (feet)?   
 Depth to Water (feet):

Facility Name: USH 2 (Belknap Street) (ID# 8680-00-01)  
 Facility ID (FID or PWS):   
 License/Permit/Monitoring #:   
 Original Well Owner:   
 Present Well Owner: WisDOT NW Region  
 Mailing Address of Present Owner: 1701 N 4th Street  
 City of Present Owner: Superior, State: WI, ZIP Code: 54880

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

Monitoring Well  
 Water Well  
 Borehole / Drillhole  
 Construction Type:  Drilled,  Driven (Sandpoint),  Dug,  Other (Specify) Geoprobe  
 Formation Type:  Unconsolidated Formation,  Bedrock  
 Total Well Depth From Ground Surface (ft):   
 Casing Diameter (in.):   
 Lower Drillhole Diameter (in.): 2.1  
 Casing Depth (ft.):   
 Was well annular space grouted?  Yes,  No,  Unknown  
 If yes, to what depth (feet)?   
 Depth to Water (feet):

**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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B5E

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing: Twin Ports Testing, Inc.	License #:	Date of Filling & Sealing or Verification (mm/dd/yyyy): 07/06/2016	Date Received:	Noted By:	
Street or Route: 1301 N 3rd St.	City: Superior	State: WI, ZIP Code: 54880	Telephone Number: (715)392-7114	Comments:	
Signature of Person Doing Work:			Date Signed: 7/19/16		

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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 <b>Douglas</b>		WI Unique Well # of Removed Well <b>()</b>		Hicap #		Facility Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			
Latitude / Longitude (see instructions) <b>46.72061 ° N</b> <b>-92.10187 ° W</b>		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)			
¼ / ¼ or Gov't Lot #		Section		Township		Range <input type="checkbox"/> E <input type="checkbox"/> W		License/Permit/Monitoring #	
Well Street Address <b>Belknap Street</b>						Original Well Owner			
Well City, Village or Town <b>Superior</b>						Present Well Owner <b>WisDOT NW Region</b>			
Subdivision Name						Mailing Address of Present Owner <b>1701 N 4th Street</b>			
Well ZIP Code <b>54880</b>						City of Present Owner <b>Superior</b>		State <b>WI</b>	ZIP Code <b>54880</b>
Lot #									

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

Reason For Removal From Service <b>Soil Boring</b>		WI Unique Well # of Replacement Well		Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Screen removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy) <b>07/06/2016</b>		Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A If bentonite chips were used, were they hydrated with water from a known safe source <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <b>Geoprobe</b>		If a Well Construction Report is available, please attach.		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)	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Total Well Depth From Ground Surface (ft)		Casing Diameter (in.)	
Lower Drillhole Diameter (in.) <b>2.1</b>		Casing Depth (ft.)		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	
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		Depth to Water (feet)		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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B5F

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <b>Twin Ports Testing, Inc.</b>		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>07/06/2016</b>	Date Received	Noted By
Street or Route <b>1301 N 3rd St.</b>		Telephone Number <b>(715)392-7114</b>		Comments	
City <b>Superior</b>		State <b>WI</b>	ZIP Code <b>54880</b>	Signature of Person Doing Work 	Date Signed <b>7/19/16</b>



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 this 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**

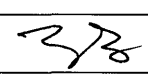
County <b>Douglas</b>	WI Unique Well # of Removed Well <b>()</b>	Hicap #	Facility Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>
Latitude / Longitude (see instructions) <b>46.72062 ° N</b> <b>-92.10166 ° W</b>	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 / 1/4 or Gov't Lot #	Section	Township	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>Belknap Street</b>	Well City, Village or Town <b>Superior</b>	Well ZIP Code <b>54880</b>	Original Well Owner
Subdivision Name	Lot #	City of Present Owner <b>Superior</b>	State <b>WI</b>
Reason For Removal From Service <b>Soil Boring</b>	WI Unique Well # of Replacement Well	City of Present Owner <b>Superior</b>	ZIP Code <b>54880</b>

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

<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole	Original Construction Date (mm/dd/yyyy) <b>07/06/2016</b>  If a Well Construction Report is available, please attach.	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 type="checkbox"/> No <input checked="" type="checkbox"/> N/A Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A  Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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? If yes, was hole retopped? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A If bentonite chips were used, were they hydrated with water from a known safe source <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <u><b>Geoprobe</b></u>	Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain)
Total Well Depth From Ground Surface (ft) <b>2.1</b>	Casing Diameter (in.)	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
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown If yes, to what depth (feet)?	Casing Depth (ft.) <b>2.1</b>  Depth to Water (feet)	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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B5G

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>	
Name of Person or Firm Doing Filling & Sealing <b>Twin Ports Testing, Inc.</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>07/06/2016</b>	Date Received	Noted By
Street or Route <b>1301 N 3rd St.</b>	City <b>Superior</b>	State <b>WI</b>	Telephone Number <b>(715)392-7114</b>	Comments
City <b>Superior</b>	State <b>WI</b>	ZIP Code <b>54880</b>	Signature of Person Doing Work 	Date Signed <b>7/19/16</b>

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 this 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: Douglas  
 WI Unique Well # of Removed Well: ()  
 Hicap #:   
 Latitude / Longitude (see instructions): 46.72062 ° N, -92.10136 ° W  
 Format Code:  DD,  DDM  
 Method Code:  GPS008,  SCR002,  OTH001  
 Section: 1/4, Township: 1/4, Range:  E,  W  
 Well Street Address: Belknap Street  
 Well City, Village or Town: Superior  
 Well ZIP Code: 54880  
 Subdivision Name:   
 Lot #:   
 Reason For Removal From Service: Soil Boring  
 WI Unique Well # of Replacement Well:   
 Construction Type:  Drilled,  Driven (Sandpoint),  Dug,  Other (Specify) Geoprobe  
 Formation Type:  Unconsolidated Formation,  Bedrock  
 Total Well Depth From Ground Surface (ft):   
 Casing Diameter (in.):   
 Lower Drillhole Diameter (in.): 2.1  
 Casing Depth (ft.):   
 Was well annular space grouted?  Yes,  No,  Unknown  
 If yes, to what depth (feet)?   
 Depth to Water (feet):   
 Original Construction Date (mm/dd/yyyy): 07/06/2016  
 If a Well Construction Report is available, please attach.

Facility Name: USH 2 (Belknap Street) (ID# 8680-00-01)  
 Facility ID (FID or PWS):   
 License/Permit/Monitoring #:   
 Original Well Owner:   
 Present Well Owner: WisDOT NW Region  
 Mailing Address of Present Owner: 1701 N 4th Street  
 City of Present Owner: Superior, State: WI, ZIP Code: 54880

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

Monitoring Well  
 Water Well  
 Borehole / Drillhole  
 Original Construction Date (mm/dd/yyyy): 07/06/2016  
 If a Well Construction Report is available, please attach.  
 Construction Type:  Drilled,  Driven (Sandpoint),  Dug,  Other (Specify) Geoprobe  
 Formation Type:  Unconsolidated Formation,  Bedrock  
 Total Well Depth From Ground Surface (ft):   
 Casing Diameter (in.):   
 Lower Drillhole Diameter (in.): 2.1  
 Casing Depth (ft.):   
 Was well annular space grouted?  Yes,  No,  Unknown  
 If yes, to what depth (feet)?   
 Depth to Water (feet):   
 Original Construction Date (mm/dd/yyyy): 07/06/2016  
 If a Well Construction Report is available, please attach.

**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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B6C

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Twin Ports Testing, Inc.	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 07/06/2016	Date Received	Noted By
Street or Route 1301 N 3rd St.	City Superior	State WI	ZIP Code 54880	Telephone Number (715)392-7114
Signature of Person Doing Work 			Comments Date Signed 7/19/16	

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 this 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: Douglas  
 WI Unique Well # of Removed Well: ()  
 Hicap #:   
 Latitude / Longitude (see instructions): 46.72062 ° N, -92.10018 ° W  
 Format Code:  DD,  DDM  
 Method Code:  GPS008,  SCR002,  OTH001  
 Section: 1/4, Township: 1/4, Range:  E,  W  
 Well Street Address: Belknap Street  
 Well City, Village or Town: Superior  
 Well ZIP Code: 54880  
 Subdivision Name:   
 Lot #:   
 Reason For Removal From Service: Soil Boring  
 WI Unique Well # of Replacement Well:   
 If a Well Construction Report is available, please attach.

Facility Name: USH 2 (Belknap Street) (ID# 8680-00-01)  
 Facility ID (FID or PWS):   
 License/Permit/Monitoring #:   
 Original Well Owner:   
 Present Well Owner: WisDOT NW Region  
 Mailing Address of Present Owner: 1701 N 4th Street  
 City of Present Owner: Superior, State: WI, ZIP Code: 54880

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

Monitoring Well  
 Water Well  
 Borehole / Drillhole  
 Original Construction Date (mm/dd/yyyy): 07/06/2016  
 Construction Type:  Drilled,  Driven (Sandpoint),  Dug,  Other (Specify) Geoprobe  
 Formation Type:  Unconsolidated Formation,  Bedrock  
 Total Well Depth From Ground Surface (ft):   
 Casing Diameter (in.):   
 Lower Drillhole Diameter (in.): 2.1  
 Casing Depth (ft.):   
 Was well annular space grouted?  Yes,  No,  Unknown  
 If yes, to what depth (feet)?   
 Depth to Water (feet):

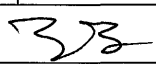
**4. Pump, Liner, Screen, Casing & Sealing Material**

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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**  
Boring B7C

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

Name of Person or Firm Doing Filling & Sealing: Twin Ports Testing, Inc.  
 License #:   
 Date of Filling & Sealing or Verification (mm/dd/yyyy): 07/06/2016  
 Date Received:   
 Noted By:   
 Street or Route: 1301 N 3rd St.  
 Telephone Number: (715)392-7114  
 Comments:   
 City: Superior, State: WI, ZIP Code: 54880  
 Signature of Person Doing Work:   
 Date Signed: 7/19/16

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 this 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 <b>Douglas</b>		WI Unique Well # of Removed Well <b>()</b>		Hicap #		Facility Name <b>USH 2 (Belknap Street) (ID# 8680-00-01)</b>			
Latitude / Longitude (see instructions) <b>46.72032 ° N</b> <b>-92.10095 ° W</b>		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)			
¼ / ¼ or Gov't Lot #		Section		Township		Range <input type="checkbox"/> E <input type="checkbox"/> W		License/Permit/Monitoring #	
Well Street Address <b>Belknap Street</b>						Original Well Owner			
Well City, Village or Town <b>Superior</b>						Present Well Owner <b>WisDOT NW Region</b>			
Subdivision Name						Mailing Address of Present Owner <b>1701 N 4th Street</b>			
Well ZIP Code <b>54880</b>						City of Present Owner <b>Superior</b>		State <b>WI</b>	ZIP Code <b>54880</b>
Reason For Removal From Service <b>Soil Boring</b>						WI Unique Well # of Replacement Well			

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

<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy) <b>07/07/2016</b>	
If a Well Construction Report is available, please attach.			
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (Specify) <b>Geoprobe</b>			
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock			
Total Well Depth From Ground Surface (ft)		Casing Diameter (in.)	
Lower Drillhole Diameter (in.) <b>2.1</b>		Casing Depth (ft.)	
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown			
If yes, to what depth (feet)?		Depth to Water (feet)	

**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 type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" 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 checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Required Method of Placing Sealing Material			
<input type="checkbox"/> Conductor Pipe-Gravity	<input type="checkbox"/> Conductor Pipe-Pumped		
<input 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
3/8" Bentonite Chips	Surface	10.0	0.4 sacks	

**6. Comments**

Boring B8D

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

Name of Person or Firm Doing Filling & Sealing <b>Twin Ports Testing, Inc.</b>		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>07/07/2016</b>	Date Received	Noted By
Street or Route <b>1301 N 3rd St.</b>		Telephone Number <b>(715)392-7114</b>		Comments	
City <b>Superior</b>	State <b>WI</b>	ZIP Code <b>54880</b>	Signature of Person Doing Work 	Date Signed <b>7/12/16</b>	