

ENVIRONMENTAL TROUBLESHOOTERS, INC.

3825 GRAND AVENUE DULUTH, MN 55807 TEL: (218) 722-6013 FAX: (218) 722-6319 TOLL FREE: 1-800-470-3536

August 30, 2021

Mr. Grant Neitzel, Hydrogeologist Wisconsin Department of Natural Resources Northern Region Remediation and Redevelopment 1701 N 4th St, Superior, WI 54880

Re: Remaining Actions Needed for Case Closure - WAC chs. NR 700-754
Fraser Shipyards – Punch Shed Building
1 Clough Avenue, Superior, Wisconsin
DNR BRRTS Activity #02-16-562899
ET Project No. 14-1004

Dear Mr. Neitzel,

Pursuant to the letter from Mr. Saari dated July 16, 2021, Environmental Troubleshooters (ET) has prepared this submittal. The two items requested are discussed below.

Remaining Actions Needed

Monitoring Well or Remedial System Piping Filling and Sealing

Site monitoring wells have been properly filled and sealed in accordance with Wis. Admin. Code ch. NR 141. Documentation of filling and sealing for all wells and boreholes is attached.

Purge Water, Waste and/or Soil Pile Removal

All purge water, solid waste and/or contaminated soil piles generated as part of site investigation or remediation activities were removed from the site concurrently with site investigation and remediation activities.

If you have any questions, please contact me at (218) 722-6013 or by email at imccarthy@etsmn.com.

Sincerely,

Environmental Troubleshooters, Inc.

Attachments: Form 4400-005 for Monitoring Wells PS-MW-1 through PS-MW-4

Cc: Mr. Dave Steininger, Fraser Shipyards, 1 Clough Ave., Superior, WI 54880

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

age 1 of 2

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal	Drinking Water Waste Manageme		Watershed/W	/astewater	Remed	liation/Redevelopment
1. Well Location Information		2. Facility	/ Owner Inf	ormation		200
County WI Unique Well # of	Hicap #	Facility Nar				
Removed Well P. M. 1		Frage	- Shipy	and		
Latitude / Longitude (see instructions) Format	Orde Manager	Facility ID (FID or PWS)			
1/10 1111' - 2 2 -						
C. 1 00 C/	SCR002	License/Pe	rmit/Monitoring	#		
	. 5	Oninin at Ma	II O			
JE/SW SW	, ,	Original We	ii Owner			
Well Street Address	9 N 14 XW	Present We	Il Owner			
		1.0000000000000000000000000000000000000				
Well City, Village or Town	IMAII ZID CARLA	Mailing Add	ress of Present	t Owner		
	Well ZIP Code					
Superior Subdivision Name	54880	City of Pres	ent Owner	AUC	State	ZIP Code
Subdivision Name	Lot #	Super			WI	54880
Reason for Removal from Service WI Unique Well	# of Replacement Well			n, Casing & Se		
	# of Replacement Well		d piping remove			Yes No N/A
3. Filled & Sealed Well / Drillhole / Borehole	Information	Liner(s) r	emoved?		П	Yes No N/A
— Original Construction	n Date (mm/dd/yyyy)	Liner(s) p	erforated?		H.	Yes No No N/A
Wionitoring Well		Screen re	emoved?		×	
Water Well	2016	Casing le	ft in place?			Yes No N/A
Borehole / Drillhole If a Well Construction please attach.	on Report is available,	Was casi	ng cut off belov	v surface?		Yes No N/A
Construction Type:			g material rise		×.	=
Drilled Driven (Sandpoint)	Dug		ial settle after 2			Yes No □N/A
Other (specify):		If yes	, was hole reto	pped?		Yes No N/A
Formation Type:				sed, were they hy	drated	Yes No N/A
	1.		r from a known	The Day of the College of the Colleg	<u>M</u>	Tes No NA
				g Sealing Material		
Total Well Depth From Ground Surface (ft.) Casing D	iameter (in.)	In the second second	ctor Pipe-Grav	ity Conducto		ed
13.5	2		nite Chips)	Other (Ex	plain):	
Lower Drillhole Diameter (in.) Casing D	epth (ft.)	Sealing Mate	erials			
		Neat C	ement Grout		Concrete	
	-	Sand-0	Cement (Concre	ete) Grout	Bentonite	Chips
Was well annular space grouted? Yes [No Unknown	For Monitori	ng Wells and M	fonitoring Well Bo		
If yes, to what depth (feet)? Depth to Water	(feet)	Bentor	nite Chips	⊠ Bent	onite - Ceme	ent Grout
13.5' 6	14'		ar Bentonite		onite - Sand	
5. Material Used to Fill Well / Drillhole				No. Yards, Sacks		Mix Ratio or
		From (ft.)	10 (11.)	Volume (circl	e one)	Mud Weight
Bentanite Liquid Gran	<u>-</u>	Surface	13.5'	18		
6. Comments						
7. Supervision of Work				100 m	DNR Use	Only
	The state of the s		or Verification	Date Received	I	Noted By
invironmental Trausleshouters	(mm/dd/yy	yy) 07/2	8/2021			
Street or Route		lephone Num		Comments		
3825 Grand Avenue			8-7625			
City State	ZIP Code	Signature of	Person Doing \	Work		Signed
Dulath Mr	55807	6	SAC		0	8/2/2021

Facility/Project Name	Local Grid Location	lopment Other		has as as	Rev. 7-98	
Fraser	Remediation/Redeve Local Grid Location	non wen □ N.	. □ E.	Well Name		
Facility License, Permit or Monitoring No.	Local Grid Origin	(estimated: 🗴)	or Well Location	PS-MW-1 Wis. Unique Well No.	DNR Well II	D No.
Facility ID	Lat. 46° 44' C	09.30 "Long - 92"	° 05' 22.86 "or			
	Section Location of	ft. N,	ft. E. S/C/N	Date Well Installed 6 4/Well Installed By: Nat	115120	16
Type of Well			a W DE	Wall Installed Pow M	d d v v	VY
Well Code/	35 1/4 of 3 N 1	1/4 of Sec. 11 .T. 4		Joe Fye	inc (iirst, last) a	ind Fi
Distance from Waste/ Enf. Stds. ource ft. Apply	u 📙 Upgradient	lative to Waste/Source s	ent	Environmental 7		
		nt n 🗆 Not Know		WINDAMENTAI /		- 6
	ft. MSL —		1. Cap and lock?		Yes 🗆	No
Well casing, top elevation	ft. MSL		2. Protective cover p			
1 4 6 1	C 1401		a. Inside diameter		_ 6	2_ in
	ft. MSL _		b. Length:		-3	1_ ft.
. Surface seal, bottom 3 ft. MS	Lor ft.		c. Material:		Sicel M	
2. USCS classification of soil near screen		震力: 化多量			Other 🗆	1000
GP GM GC GW G	V П SP П	1 1 1 1 1	d. Additional prote	ection?	☐ Yes ☐	No
SM SC ML MH C	СНП	/们 []//	ir yes, describe	Wood Bumper Post		
Bedrock [3. Surface scal:		Bentonite X	
3. Sieve analysis performed?	es 🗆 No				Concrete 🗷	. 01
	ry 🗆 5 0		`		Other 🗆	2
Hollow Stem Aug			4. Material between s	well casing and protective		00,70
Orthonor Stell Aug	er 🗆				Bentonite 💆	3 0
	CA CAS				Other 🗆	4
Drilling fluid used: Water 0 2	Air 🗆 01			: a. Granular/Chippe		
	me X 99		bLbs/gal mi	id weight Bentonite-	-sand slurry □	35
	/~		cLbs/gal mu	id weight Bento	nite slurry D	3 1
5. Drilling additives used?	s XI No		d % Bentonite	e Bentonite-ce	ment groot []	5 0
			e	volume added for any of	f the above	
Describe			f. How installed:		Tremie 🛘	01
. Source of water (attach analysis, if requir	ed):			Tremi	ie pumped 🗆	02
			6.5		Gravity 🕱	0.8
•			6. Bentonite seal:		le granules 🙇	33
Bentonite seal, top _ O. S _ ft. MSL	nr 6		b. □1/4 in. □3/3	8 in. 1/2 in. Bente	onite chips	32
bentome sear, by _ 55 2 _ 1t MSE	, II		c,		Other [* 60
fine sand, topft_MSL	or ft.		7. Fine sand material:	Manufacturer, product	name & mesh	
Filter pack, top2.Sft. MSL	or 0.	/图图/	a Red Flint, Film			-
- Feb. 37 - 1 11 11 11 11 11 11 11 11 11 11 11 11			b. Volume added _	n ³		
Screen joint, top ft. MSL o	or A—		8. Filter pack material	Manufacturer, product	t name & mesh	size
		十二一	a. Kee + lint, to	iter sand, 0.050	i	
Vell bottom	or fl.\	上置了	 Volume added Well casing: F 	Flush threaded PVC sche	11.40 =	
			rom change.	Flush threaded PVC sche	edule 40	23
iller pack, bottom13SIL MSL c	r ft	了量了		nosh unreaded PVC sche	Other	24
orehole, bottom	r fl.s	10	0. Screen material:			-
			 Screen type: 	Fa	actory cut M	11
orehole, diameter _ 6 4 in.				Continu	uous slot	01
			1 14 6		Other 🗆	-
D.D. well casing _ 2 _ in.			b. Manufacturer c. Slot size:	Johnson		
		1	d. Slotted length:		0.0/0	
D. well casing 1.98 in.		N.		\$ 100 kg 150 kg	-10.	
==== M.		11	l. Backfill material (be	low lilter pack):	None A	1 4
		to the best of my know			Other	

Please complete both Forms 4400-113A and 4400-113B and return them to the appropriate DNR office and bureau. Completion of these reports is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file information on these forms is not intended to be used for any other purpose. NOTE: See the instructions for more information, including where the completed forms should be sent.

State of Wisconsin Department of Natural Resources

MONITORING WELL DEVELOPMENT Form 4400-113B Rev. 7-98

4	County Name		Well Name	
Fraser	Dougl	as	PS-mw-	1 VT908
Facility License, Permit or Monitoring Number	County Code	Wis. Unique Well N	umber D	NR Well ID Number
1. Can this well be purged dry?	Yes 🗆 No	11. Depth to Water	Before Develo	opment After Development
2. Well development method		(from top of	104	7 n 15 02 n.
surged with bailer and bailed	41	well casing)	a <u></u>	_ne.n.
surged with bailer and pumped	61			
	42	Date	04,27,	2016 54 27 20
surged with block and pumped	62		$\frac{1}{m} \frac{1}{m} \frac{1}{d} \frac{1}{d}$	$\frac{2016}{yyy} = \frac{04}{mm} \frac{127}{d} \frac{20}{yyy}$
	70			
	20	Time	c. 4:00 k] a.m. ∫ p.m. <u>4</u> :30 ☐ a.m.
	10			A
	51	12. Sediment in well	i	nches inches
Out	5 0	bottom		
Other		13. Water clarity	Clear 🛛 10	Clear 🔼 20
Time spent developing well 3,	1		Turbid 🖾 15	Turbid□ 25
. Tune spent developing well	<u>D_min.</u>		(Describe)	(Describe)
. Depth of well (from top of well casisng) _15	. <u>C</u> ft.			
. Inside diameter of well _2.5	in.			
. Volume of water in filter pack and well	.,,			
casing $-\frac{1}{2}$	4 gal.	Europe and Street and Africa		
. Volume of water removed from well	. <u>/</u> gal.	Fill in if drilling fluids	were used and we	ell is at solid waste facility:
Volume of water added (if any)	gal.	14. Total suspended _ solids		mg/l mg/l
Source of water addedN/A		15. COD		mg/l mg/l
		16 Wall danala - 4 h		
. Analysis performed on water added?		16. Well developed by:		
(If yes, attach results)	- U 140	First Name: Brice	Last	Name: Wizner
		Firm: Faviore	wester T	rubleshooters
. Additional comments on development:		2111/011	//	restes hosters
me and Address of Facility Course (C)				
me and Address of Facility Contact/Owner/Responsible	Party	I hereby certify that il	ie above informat	ion is true and correct to the best
ti Last ne: Name:		of my knowledge.	missimat	and and correct to the best
ility/Firm;		Signature;		
et	4 -			
eet:	F	Print Name:		

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Page 1 of 2

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Route to DNR Bureau:

Watershed/Wastewater

Watershed/Wastewater

Watershed/Wastewater

Verification Only of Fill and Seal	Drinking Water		Watershed/₩	Vastewater	Remed	diation/Redevelopment
	Waste Manageme	ent	Other:			
1. Well Location Information			ty / Owner Inf	formation		
County WI Unique Well # of Removed Wellps > 2	Hicap #	Facility Na				
		Fras	(FID or PWS)	Yard		
7-9/03	t Code Method Code	Facility ID	(FID or PWS)			
	DD GPS008					
	SCR002	License/Pe	ermit/Monitoring	#		
	бом Потноо1					
36/3W 3W	wnship Range E	Original W	ell Owner			
or Gov't Lot #	19 N 14 WW					
Well Street Address		Present W	ell Owner			
Uell City, Village or Town						
Well City, Village or Town	Well ZIP Code		dress of Presen			
Superior	54880	1	Sent Owner	Ave		
Subdivision Name	Lot #				State	ZIP Code
			perior		WI	
A	II # of Replacement Well			n, Casing & S	ealing Mat	
Project Complete			nd piping remov	rea r		Yes No N/A
3. Filled & Sealed Well / Drillhole / Borehole			removed?			Yes No NA
With the state of	on Date (mm/dd/yyyy)		perforated? removed?			Yes No NA
Water Well 94/15/2	2016		eft in place?		×	Yes No NA
If a Well Construct	tion Report is available,	-	V 40	F. 10.10.		Yes ☑ No ☐ N/A
Borehole / Drillhole please attach.			sing cut off belov			Yes No N/A
Construction Type:		200	ing material rise		X	Yes No N/A
Drilled Driven (Sandpoint)	Dug		erial settle after			Yes No □ N/A
Other (specify):		A STATE OF THE STA	s, was hole reto	ppea? used, were they h	udrotod	Yes No N/A
Formation Type:			er from a known		yurateu	Yes No N/A
Unconsolidated Formation Bedre	ock	Required M	lethod of Placin	g Sealing Materia	l .	
Total Well Depth From Ground Surface (ft.) Casing	Diameter (in.)	Cond	uctor Pipe-Grav	rity X Conducte	or Pipe-Pump	ped
13.5'	211		ened & Poured	Other (E	xplain):	
	Depth (ft.)	Sealing Ma	onite Chips)		V 100 0	
			Cement Grout	Г	Concrete	
				coto) Crout [
Was well annular space grouted?	No Unknown		-Cement (Concr		Bentonite	C. 100 L
If yes, to what depth (feet)? Depth to Water				Monitoring Well Bo		
			onite Chips	-	tonite - Ceme	
	27'	Granu	ular Bentonite		tonite - Sand	
5. Material Used to Fill Well / Drillhole		From (ft.)	To (ft.)	No. Yards, Sack Volume (circ		Mix Ratio or Mud Weight
Bentonite liquid a	irnut	Surface	13.5'	18		
9-0						
6. Comments						
7. Supervision of Work		SHAR	1774		DNR Use	Only
	ense # Date of Fill	ling & Sealin	g or Verification	Date Received		Noted By
nuironmental Translectioners	(mm/dd/yy	(yy) $a7$	28/2021			
Street or Route	Te	elephone Nur	mber	Comments		
3825 Grand Avenue	(2	218 172	2-6013	5		
City State	ZIP Code		f Person Doing	Work	Dat	e Signed
Dulyth Mr	1 55807				0	8/2/202

acility/Project Name	Remediation/Redevelopment (orm 4400-113A Rev. 7-98	
Fraser	Local Grid Location of Well ft. S.		Vell Name	
acilia License Permit or Monitorine No.	I coal Grid Odd ST	fr. 🗆 E.	PS-MW-2 VT911	
facility License, Permit or Monitoring No.	Lat. 46 ° 44 ' 09.38 "Long	2 or Well Location □ W	Vis. Unique Well No. DNR Well II	DN
	St. Plane ft. N, Section Location of Waste/Source		Date Well Installed 4/15/20) 1
ype of Well		MA MOEN	m m d d v v Vell Installed By: Name (first, last)	- 11
Well Code/	SE 1/4 of SW 1/4 of Sec. 11	111 11 11 11 11 11 11 11 11 11 11 11 11	Joe Fye	and
vistance from Waste/ Enf. Stds. ourcefi. Apply	Location of Well Relative to Wasten Upgradient s Sic	legradient	Environmental Troubleshood	te
Protective pipe, top elevation	ft_MSL	1. Cap and lock?	X Yes □	
All the second of the second o		2. Protective cover pipe	≥: 1es L	_ r
Land surface elevation	ft. MSL	b. Length:		2
		c. Material:]_
Surface seal, bottom 3 ft. MS	Lor ft.		Steel &	
2. USCS classification of soil near screen	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	d. Additional protect	Other D	
	W = SP =	If yes, describe U	Vood Bumper Posts Bentonite M	
Bedrock □		3. Surface scal:	Concrete 🖔	
	es 🗆 No		Othet	
. Drilling method used: Rota		4. Material between we	Il casing and protective pipe:	1
Hollow Stem Aug			Bentonite 🗵	1
Oil			Other 🗆	
Davis Carlos V. W. Davis		5. Annular space seal:	a. Granular/Chipped Bentonite	1
	Air 🗆 01		weight. Bentonite-sand slurry	
Simming Inda D 0.3 No	me X 99		weight . Bentonite slurry D	
Drilling additives used?	s XI No	d % Bentonite	Bentomie-cement grow [7]]
7		c	dume added for any of the above	
Describe		f. How installed:		1
Source of water (attach analysis, if requir	cd):		Trainic pumped []	1
		1.00-2-2-2	Gravity M	-
		6. Bentonite scal:	a. Bentonite granules 🛚	
Bentonite seal, top _ O. S _ ft. MSL	or 6 🔯 🕽	b. □1/4 in. □3/8 i	in. 1/2 in. Bentonite chips []	
remaine sear, up 22 2 11, mate	3 8 日	/ c	Other [
ine sand, top /ft_MSL	or ft.	7. Fine sand material: A a Red Alint, Fitter	Manufacturer, product name & most	h s
ilter pack, top2.Sft. MSL	or A.\	b. Volume added		-
			Manufacturer, product name & mes	
creen joint, top	or ft.	a Red Flint, fait	Manufacturer, product name & mes	sh :
, n		b. Volume added	TA 0.050	į
Yell boutom	or ft.		ush threaded PVC schedule 40	
			ush threaded PVC schedule 80	
lter pack, bottom13 ft. MSL e	orft	`		
12 5		10. Screen material:	Other 🗆	7
orehole, bottom/3.5_ft. MSL t	orn.	a. Screen type:	E-mail - A	1
, L,			Factory cut X Continuous slot	1
orehole, diameter _ 6 1/4 in.	· Eccard			(
		b. Manufacturer	Johnson Other	-
0.D. well casing $2 - in$		c. Slot size:	0.076	
D. well casing 1.98 in		d. Slotted length:	_10	
D. wen casing		11. Backfill material (belo	ow filter pack): None A	1
			Other	

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

State of Wisconsin Department of Natural Resources

MONITORING WELL DEVELOPMENT Form 4400-113B Rev. 7-98

4		y Name		Well Name		
Fraser		loug la		PS-mw	-2	VT911
Facility License, Permit or Monitoring Number	Count	y Code	Wis. Unique Well N	lumber		ell ID Number
1. Can this well be purged dry?	Yes 🗆	No		Before Dev	elopmer	After Development
2. Well development method			11. Depth to Water (from top of	Ц	(5	_ 14.66 fi.
surged with bailer and bailed	4.1		well casing)	a	<u>•</u> [t.	_ <u>17.60</u> fi.
surged with bailer and pumped	4 1 6 1		, and subject to			
surged with block and bailed	42		Date	0110		
surged with block and pumped	62		Date	b. 07/2/	120	$\frac{16}{y} \frac{04}{m} \frac{127}{m} \frac{20}{d} \frac{20}{y}$
surged with block, bailed and pumped	70	1				
compressed air	20		Time	2.45	a.m.	3:45 p.m.
bailed only	10		· · · · ·		- Jet b.m.	p.m.
pumped only	51		12. Sediment in well	-	inches	inches
pumped slowly	50		bottom		_ menes	menes
Other			13. Water clarity	Clear 🛘 1	0	Clear 20
	60.30		and Albert and S	Turbid 1		Turbid□ 25
. Time spent developing well	55_ min			(Describe)		(Describe)
				(02.514.05)		(Describe)
. Depth of well (from top of well casisng) $= 12$	1.7 ft.					
		- 1			-	
. Inside diameter of well -2 .	<u>o o _</u> in.					
N. C.		1				
Volume of water in filter pack and well	, A					
casing	3.0 ga					
V.1	2	i	Fill in if drilling fluids	s were used and	well is a	at solid waste facility:
Volume of water removed from well	$\frac{3}{2}$ gal			_		
Volume of water added (if any)			14. Total suspended		mg/l	mg/l
	_ · _ gal.		solids			
Source of water added NA		1.	15. COD			
		- 1	13. COD		mg/l	mg/l
	-	- 1	6. Well developed by	: Name (first las	t) and Firm	
. Analysis performed on water added? Y	cs 🗆		First Name: Brice			
(If yes, attach results)						:: Wizner
· · · · · · · · · · · · · · · · · · ·			Firm: Enviro	mental	Trovb	leshooters
. Additional comments on development:			•		/	, , , , , , ,
	.00					
ne and Address of Facility Contact/Owner/Responsibl	e Party		Thomas and C. N	4		
t Last			of my knowledge.	the above infor	mation is	true and correct to the best
ne: Name:			of my knowledge.			
ility/Firm:		Si	gnature;			
et:		i D.	int Mama.			
et:		Pı	int Name:			

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

age 1 of 2

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

	Route to DNR Bureau	:				
☐ Verification Only of Fill and Seal	Drinking Water	_ <u>_</u>	Watershed/W	/astewater	Remedi	ation/Redevelopment
	Waste Manageme	ent	Other:			
1. Well Location Information	V	2. Facility	/ / Owner Inf	ormation		
County WI Unique Well # of Removed Well # SAME 3	Hicap #	Facility Nar		weed		
Douglas VI412		Facility ID (FID or PWS)	2000		
	at Code Method Code					
	DDD SCR002	License/Pe	rmit/Monitoring	#		
14/4 SE/SW 14 SW Section To	wnship Range E	Original We	ell Owner		<i>110.</i>	
1/	49 N 14 WW	Present We	II Owner			
Well Street Address		1 1000111 110	a Gillion			
Well City, Village or Town	Well ZIP Code	Mailing Add	ress of Present	t Owner		
	54880					
Superior Subdivision Name	Lot #	City of Pres	ent Owner		State	ZIP Code
	2011	Sup	eriar		WI	54880
Reason for Removal from Service WI Unique We	ell # of Replacement Well	4. Pump,	Liner, Scree	n, Casing & So	ealing Mate	rial
Project complete		Pump an	d piping remove	ed?		Yes No No N/A
3. Filled & Sealed Well / Drillhole / Borehole	e Information	Liner(s) r			Δ,	Yes No N/A
Monitoring Well Original Construct	ion Date (mm/dd/yyyy)		erforated?		☐ <u>`</u>	Yes No No NA
- 0u/10	120 25	Screen re				Yes No N/A
If a Well Construct	tion Report is available,	Casing le	ft in place?			Yes ₩ No N/A
Borehole / Drillhole please attach.		Was casi	ng cut off below	v surface?		res No No N/A
Construction Type:			ng material rise		×	res No N/A
Drilled Driven (Sandpoint)	Dug	40.00	rial settle after 2			res No N/A
Other (specify):			, was hole reto			res No N/A
Formation Type:			te cnips were u r from a known	sed, were they hy safe source?	ydrated	res No N/A
Unconsolidated Formation Bedr	rock	Required Me	ethod of Placing	g Sealing Materia	l	
Total Well Depth From Ground Surface (ft.) Casing	Diameter (in.)	Condu	ctor Pipe-Gravi	ity Conducto	or Pipe-Pumpe	ed
17 5	211		ned & Poured	Other (E)	xplain):	
Lower Drillhole Diameter (in.) Casing	Depth (ft.)	Sealing Mat	nite Chips) erials			
zama, zminata ziamieta (iii.)	Dopan (III.)		Cement Grout	- 1	Concrete	
			Cement (Concre	ete) Grout F	Bentonite	Chine
Was well annular space grouted?	No Unknown			fonitoring Well Bo		
If yes, to what depth (feet)? Depth to Wat	ter (feet)	1 —	nite Chips	The second secon	tonite - Ceme	
13.5' 5.	74'		lar Bentonite		tonite - Sand	
Charles and the Automorphism of Business Automorphisms			Control of the last	No. Yards, Sacks		Mix Ratio or
5. Material Used to Fill Well / Drillhole		From (ft.)	10 (11.)	Volume (circ		Mud Weight
Bentonite Li	and Gmit	Surface	13.5'	18		
6. Comments	I Seed to See a					
7. Supervision of Work	*				DND II	
	cense # Date of Fil	ling & Sealing	or Verification	Date Received	DNR Use	John Joted By
ovironmental Troubleshooters	(mm/dd/yy		28/2021		, i	2000
Street or Route		elephone Num		Comments		
3825 Grand Avenue	100	218 172	2	- 42000-12012		
City State	ZIP Code		Person Doing	Work	Date	Signed
Mylyth M	V 55807		1	>_	7 (4.3)	8/02/2021

Facility/Project Name	Remediation/Redevelopment	Other	Form 4400-113A Rev. 7-98
Fraser	Local Grid Location of Well	IN	Well Name
Facility Lipport Dormit on Maria in Maria	ft.	□ S	PS-MW-3 VT912
Facility License, Permit or Monitoring No.	Lat. 46° 44' 11.66	mated \square) or Well Location \square "Long $\neg 92^{\circ}$ o	Wis. Unique Well No. DNR Well ID
Facility ID	St. Planeft. Section Location of Waste/Sc	N, fi. E. S/C/N	Date Well Installed 4 / 1 S / 2 0 1 V V V V V V V V V V V V V V V V V V
Type of Well			m m d d v v v
Well Code/	SE 1/4 of SW 1/4 of Sec	.11.T. 49 N.R. 14 XW	Joe Fye
Distance from Waste/ Enf. Stds. Sourceft. Apply	Location of Well Relative to u Upgradient s [☐ Sidegradient	Environmental Troubleshoote
The Control of the Co	ft MSL	1. Cap and lock?	
	fi. MSL	2. Protective cover p	je: Yes □
		a Inside diameter	6
	ft. MSL	b. Length:	7
O. Surface seal, bottom 3 ft. MS	Lor ft.	c. Material:	Steel 🛛
12. USCS classification of soil near screen		[·]\	Other 🗆
and a second of the second of	W D SP D	d. Additional prote	ection?
SM D SC D MLD MHD C		If yes, describe	Wood Bumper Posts
Bedrock		3. Surface scal:	Bentonite 🛛
3. Sieve analysis performed?	es 🗆 No		Concrete 🕅
	iry 🗆 5 0	N	Other 🗆
Hollow Stem Aug		4 Material between v	well casing and protective pipe:
Oct	ier D		Bentonite 🕅
			Other [
5. Drilling fiuid used: Water 🗆 0.2	Air 🗆 01	5. Annular space seal	; a. Granular/Chipped Bentonite
	one X 99	bLbs/gal mi	id weight Bentoniie-sand slurry []
		cLbs/gal mu	id weight Rentonite slurry []
6. Drilling additives used?	es XI No	d % Bentonit	Bentorite-cement grout
			volume added for any of the above
Describe		f. How installed:	Tremie 🗆
Source of water (attach analysis, if require	ed):		Tremic pumped 🗇 (
		6 Pentonita seet	Gravity 🕱
		o. Bentontie seat:	a. Bentonite granules 💆
Bentonite seal, top _ O. S _ ft. MSL	orfi.,	B. 11/4 III. 113/	8 in. 1/2 in. Bentonite chips 1
Fine sand, top / Sft_MSL		7. Fine sand material:	Other Manufacturer, product name & mesh si
	/ 1 2	Red Alint, fits	ter sand, 0.0/0
filter pack, top 2.S ft. MSL o	or fi.	b. Volume added	63
Screen joint, top	or ft.	8. Filter pack material Red Flint, fe	Manufacturer, product name & mesh s
/2		b. Volume added_	10 ft ³
Vell boutomf tt MSL c	or ft.	9. Well casing:	Plush threaded PVC schedule 40 [] 2
Filter pack, bottom13.5 _ ft. MSL o	or ft.	F	Flush threaded PVC schedule 80 [] 2
Borchole, bottom	or fly	10. Screen material:	Other ,
		a. Screen type:	Factory cut 💢 1
orehole, diameter _ 6 4 in		2	Continuous slot 🗍 0
		\	Other 🗆
O.D. well easing _ 2 _ in.		b. Manufacturer	Johnson
		c. Slot size:	0.010 i
.D. well easing 1.98 in.		d. Slotted length:	_10_!
III.		11. Backfill material (he	
	m is true and correct to the be		Other 🗆

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

Facility/Firm:

City/State/Zip:

MONITORING WELL DEVELOPMENT Form 4400-113B Route to: Watershed/Wastewater Waste Management Remediation/Redevelopment Other ____ Facility/Project Name County Name Well Name traser Douglas PS-MW-3 VT912 Facility License, Permit or Monitoring Number County Code Wis. Unique Well Number DNR Well ID Number 1. Can this well be purged dry? ☐ Yes No No Before Development After Development 11. Depth to Water a. _ 4 57 ft _ 5 82 ft 2. Well development method (from top of surged with bailer and bailed · well casing) 41 surged with bailer and pumped 61 surged with block and bailed $b.\frac{0}{m}\frac{4}{m}/\frac{2}{d}\frac{7}{d}/\frac{2}{y}\frac{0}{y}\frac{1}{y}\frac{6}{y}\frac{0}{m}\frac{4}{m}/\frac{2}{d}\frac{7}{d}/\frac{2}{y}\frac{0}{y}\frac{1}{y}\frac{6}{y}$ 42 Date surged with block and pumped 62 surged with block, bailed and pumped 70 c. 12:45 a.m. compressed air Time 20 bailed only pumped only 12. Sediment in well 51 pumped slowly bottom □ 50 Other Clear □ 10 Turbid ☑ 15 13. Water clarity Clear X 20 Turbid□ 25 3. Time spent developing well 60 min. (Describe) (Describe) Slight sediment. _15.3 ft. 4. Depth of well (from top of well casisng) 2 00 in. 5. Inside diameter of well 6. Volume of water in filter pack and well 2 9 gal. casing Fill in if drilling fluids were used and well is at solid waste facility: 31 7 gal. 7. Volume of water removed from well 14. Total suspended ____. 8. Volume of water added (if any) solids 9. Source of water added 15. COD ____ mg/l ___ mg/l 16. Well developed by: Name (first, last) and Firm 10. Analysis performed on water added? TT Yes □ No First Name: Brice Last Name: Wizner (If yes, attach results) Firm: Environmentel Transfeshooters 17. Additional comments on development: Name and Address of Facility Contact/Owner/Responsible Party I hereby certify that the above information is true and correct to the best First of my knowledge. _ Name: _

Signature:

Print Name:

Firm:

NO7 ... See instructions for more information including a list of county codes and well type codes.

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

age 1 of 2

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Route to DNR Bureau:

Verification Only of Fill an	d Seal Drinking Wate	r Watershed/Wa	stewater	Remediation/Redevelopment
1. Well Location Information		2. Facility / Owner Info	rmation	
County WI Unique	Well # of Hicap #	Facility Name		
	Vell PSAW 4	Frager Cla	Duam	
	910	Fraser Sh.	Paul	
Latitude Longitude (see instructions)	Format Code Method Cod			
-92° 05' 23.77	N DD GPS00 W SØDM DOTHOO	License/Permit/Monitoring #		
74174 SE/SW 74 SW Se	ction Township Range	E Original Well Owner		
	1) 49 N 14 X	Present Well Owner		
Well Street Address		Fresent Well Owner		
Well City, Village or Town	0	14.00-4.00-6.00	•	
Well City, Village or Town	Well ZIP Code	Mailing Address of Present		
Superior	54880	City of Present Owner	Ave	
Subdivision Name	Lot#			tate ZIP Code
		Superior		NI 54880
Reason for Removal from Service	VI Unique Well # of Replacement W	4. Pump, Liner, Screen		
project complete		Pump and piping remove	d?	Yes No NA
3. Filled & Sealed Well / Drillhold	/ Borehole Information	Liner(s) removed?		Yes No No
Origi	nal Construction Date (mm/dd/yyyy)	Liner(s) perforated?		Yes No N/A
Monitoring Well	04/15/201	Screen removed?		Yes No N/A
Water Well	04/13/0016	Casing left in place?		Yes No N/A
	Well Construction Report is available se attach.	Was casing cut off below	surface?	Yes No N/A
Construction Type:		Did sealing material rise to	surface?	Yes No N/A
Drilled Driven (Sanda	point) Dug	Did material settle after 24	hours?	Yes No N/A
Other (specify):		If yes, was hole retop	ped?	Yes No N/A
		If bentonite chips were us	ed, were they hydrate	
Formation Type:		with water from a known s	district die 1	Yes No N/A
Unconsolidated Formation	Bedrock	Required Method of Placing	Sealing Material	
Total Well Depth From Ground Surface	(ft.) Casing Diameter (in.)	Conductor Pipe-Gravity	Conductor Pipe	e-Pumped
13 (1	2 "	Screened & Poured	Other (Explain):
Lower Drillhole Diameter (in.)	Casing Depth (ft.)	☐ (Bentonite Chips) Sealing Materials		/
Lower Diffinole Diameter (iii.)	Casing Depth (it.)			2
		Neat Cement Grout		oncrete
Was well annular space grouted?	Yes No Unknow	Sand-Cement (Concre	e) Grout Be	entonite Chips
		For Monitoring Wells and Mo	nitoring Well Borehol	es Only:
	Depth to Water (feet)	Bentonite Chips	■ Bentonite	- Cement Grout
13.51	6.89	Granular Bentonite	Bentonite	- Sand Slurry
5. Material Used to Fill Well / Dril	lhole	From (ft.) To (ft.)	lo. Yards, Sacks Seal Volume (circle one	
Ro-Lasto 1	ignid Grant	Surface 13.5'	Lg	e) Mud Weight
DENTINIC	inguid Grast	Surface 73.1	18	
C Commont				
6. Comments				
7 Companie in a f Wards				
7. Supervision of Work Name of Person or Firm Doing Filling &	Sealing License # Date of	Filling & Sealing or Verification		R Use Only
		~ / - /	Date Received	Noted By
ovironmenta Transleshou	Ters (min/de	7 0 0 0 0		
Street or Route	14.04	Telephone Number	Comments	
3825 Grand Aven		(218) 722-6013		
City	State ZIP Code	Signature of Person Doing W	ork	Date Signed
Dulath	MN 55807			98/02/2021

cility/Project Name	Remediation/Redevelopment Or			
Fraser	Remcdiation/Redevelopment Or Cocal Grid Location of Well N. S. S.	DE. W	ell Name	
cility License, Permit or Monitoring No	It on S.		5-MW-4 V7910	
icinty License, Perint of Monitoring No	Lat. 46° 44' 08.85 "Long.	□) or Well Location □ W -92° 05' 23.77 "or	is. Unique Well No. DNR Well I	D No
cility ID	S1. Planc ft. N,	ft. E. S/C/N	ate Well Installed 4/15/20	16
rpc of Well	Section Location of Waste/Source		m m d d v v	V 1
Well Code /	SE 1/4 of SW 1/4 of Sec. 11.	1 11, 10, 12, W	ell Installed By: Name (first, last) a	and F
stance from Waste/ Enf. Stds.	Location of Well Relative to Waste/S u Upgradient s Side	Source Gov. Lot Number	DOE FYE	-
urceft. Apply	d Downgradient n Not		Environmentel Troubles	hoot
Protective pipe, top elevation	ft. MSL	1. Cap and lock?	X Yes	
Well casing, top elevation	ft. MSL	2. Protective cover pipe a. Inside diameter:		o in
Land surface elevation	fi.MSL	b. Length:		7_6
		c. Material:	Steel	
Surface seal, bottom 3 ft. M	SL or ft.		Other E	
. USCS classification of soil near scree		d. Additional protecti		
GP GM GC GW G	SW 🗆 SP 🔲		ood bumper posts	
SM □ SC □ ML□ MH□ (Bedrock □	CL CH	1 1	Bentonite 🗷	1 3
		3, Surface scal:	Concrete)	
	Yes □ No	1	Other 🗆	
	tary 🗆 5 0	Material between well	casing and protective pipe:	***
Hollow Stem At			Bentonite 🔀	(3
0	ther 🗆		Other 🗆	1
Delline Suidened Water F 0.2		5. Annular space scal:	a. Granular/Chipped Bentonite	3
아이는 아이들에 가지 않는데 얼마나 가입니다. 그리고 있는데 그리고 있는데 하다 다 없다.	Air 01	bLbs/gal mud v	veight Bentonite-sand slurry	1 3
Dining Mad [] () 3	lone 🕲 99	cLbs/gal mud v	veight Bentonite slurry [1 3
Drilling additives used?	res 🛍 No	d % Bentonite .	Bentonite-cement grout [5
		eFt vol	ume added for any of the above	
Describe		f. How installed:	Tremie 🗆	
Source of water (auach analysis, if requ	ired):		Tremie pumped	
		4.4	Gravity 🚜	
		6. Bentonite seal:	a. Bentonite granules	
entonite seal, top _ O.S _ ft. MSI		b. □1/4 in. □3/8 in	□ 1/2 in. Bentonite chips □	
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	/ c	Other 🗆	
ne sand, topft. MSI	-or ft.	7. Fine sand material: N a. Red flind, firth	lanufacturer, product name & mest	h siz
ilter pack, top _ 2.5 _ ft. MSI	orft.\	b. Volume added	n ³	
			Janufacturer, product name & mes	h rin
creen joint, top ft. MSI	or ft.	a Red flint filt		11 512
		b. Volume added	10 ft3	
'ell bottomft. MSL	or fl.\		sh threaded PVC schedule 40	2:
			sh threaded PVC schedule 80	24
lter pack, bottom13.5ft_MSL	or ft.	\	Other	1.42
12 C		10. Screen material:		
orehole, bottom 13.5 _ ft. MSL	or ft.	a. Screen type:	Factory cut	11
orehole, diameterin.			Continuous slot	01
orehole, diameter in.	-		Other	
7		b. Manufacturer	Johnson	*** ***
D.D. well casing 2_ in.		c. Slot size:	0.Q <u>L</u>	
1 00		d. Slotted length:	_ 10	<u>0_</u> n.
D. well casing 1.98 in.		11. Backfill material (below	v filter pack): None	14
			Other	200

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

MONITORING WELL DEVELOPMENT Form 4400-113B Rev. 7-98

Facility/Project Name			elopment 💢		San San Property and the san P	
Fraser		(County Name		Well Name	
Facility License, Permit or Monitoring Number	_	-	Doug		PS-MW-	4 17910
- Table of Francisco Palation of Palation			County Code C	Wis. Unique Well N	lumber	DNR Well ID Number
1. Can this well be purged dry?	M	Yes	□ No	11 B 4 W	Before Dev	velopment After Development
2. Well development method				11. Depth to Water (from top of	<	15n 11.21n.
surged with bailer and bailed	100			well casing)	a 3.	12ft 11. < 1 ft.
surged with bailer and pumped	M.	41		men dibing)		
surged with block and bailed		61		Date	0-	
surged with block and pumped		62		Date	b. 04/4	$\frac{1}{1} \frac{20}{y} \frac{1}{y} \frac{6}{y} \frac{04}{m} \frac{27}{d} \frac{20}{y}$
surged with block, bailed and pumped		70		L'		
compressed air		20		Time	. 10.45	∑ a.m. 12:30 p.m.
bailed only	n	10		1 mic	c	12:50 p.m.
pumped only		51		12. Sediment in well	-	inchesinches
pumped slowly		50		bottom		inchesinches
Other	П	- V		13. Water clarity	Clear 🛘 1	0 Clear 🕱 20
	_	Trien.		To the diameter	Turbid 1	5 Turbid 25
3. Time spent developing well		90	min.		(Describe)	(Describe)
					(Describe)	Slight sediment
Depth of well (from top of well casisng) _	15	2.5	ft.	//		- 2 ndu zecimen
. Inside diameter of well	2.	20	_ in.			
. Volume of water in filter pack and well						
casing	_ 2	8	gal.			
V. Volume of water removed from well	_ 2	1.	gal.	Fill in if drilling fluids	were used and	d well is at solid waste facility:
. Volume of water added (if any)	_	_	gal.	14. Total suspended solids		mg/l mg/l
. Source of water addedN/A				15. COD		mg/l mg/l
				6. Well developed by	: Name (first, las	t) and Firm
	□ Ye	s	□ No	First Name: Brice		Last Name: Wizne
(If yes, attach results)			3 13			
				Firm: Environ	nmenta/	Troubleshooters
. Additional comments on development:						
		-				
me and Address of Facility Contact/Owner/Resp	onsible	Part	v I	-		
st Last				I hereby certify that to of my knowledge.	he above infor	mation is true and correct to the best
ility/Firm:			s	ignature:		
eet:			р	rint Name:		
y/State/Zip:				irm:		