

## Letter of Transmittal

***Submitted to:***

**Andrew Alles**

WI Dept. of Natural Resources  
101 S. Webster St.  
Madison WI 53707 7921

PO BOX 7921

Date:

6/10/2020

Attached

Job:

Mr. P's Tires

Under Separate Cover

Contents:

Well Abandonment Forms for the Mr. P's Tires site located at 2715 W. Clybourn Street in Milwaukee, WI.  
BRRTS #: 03-41-563586

**Remarks:**

Attached are the well abandonment forms for the above site as requested in your email correspondence dated 6/10/20. The wells have been properly abandoned and no investigative waste remains on-site. Attached are well abandonment forms documenting that the work was completed. Following your review of this information please forward the "Final Closure" letter to our client and copy METCO.

If you have any questions please call or email.

Signed: Jason Powell

cc: Mark Pachefsky - Client

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

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

Verification Only of Fill and Seal

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

1. Well Location Information				2. Facility / Owner Information			
County <b>MILWAUKEE</b>		WI Unique Well # of Removed Well <b>VR682</b>	Hicap #	Facility Name <b>Mr. P's Tires (Former)</b>		Facility ID (FID or PWS) <b>341261030</b>	
Latitude / Longitude (Degrees and Minutes) <b>43 ° 2.16 ' N</b> <b>87 ° 56.89 ' W</b>		Method Code (see instructions)		License/Permit/Monitoring #		Original Well Owner <b>Mark Pachefsky</b>	
¼ ¼ NE	¼ SE	Section <b>25</b>	Township <b>7 N</b>	Range <b>21</b>	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Present Well Owner <b>Mark Pachefsky</b>	
Well Street Address <b>2705 West Clybourn Street</b>				Mailing Address of Present Owner <b>4475 Club Drive</b>			
Well City, Village or Town <b>Milwaukee</b>			Well ZIP Code <b>53208-</b>		City of Present Owner <b>Slinger</b>		State <b>WI</b>
Subdivision Name			Lot #		ZIP Code <b>53086-</b>		

Reason For Removal From Service <b>Sampling Complete</b>		WI Unique Well # of Replacement Well	<b>4. Pump, Liner, Screen, Casing &amp; Sealing Material</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 Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A				
3. Well / Drillhole / Borehole Information							
<input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole	Original Construction Date (mm/dd/yyyy) <b>7/17/2017</b>						
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____		Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain): <b>Gravity</b>					
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Sealing Materials <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " " <input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite Chips					
Total Well Depth From Ground Surface (ft.) <b>14</b>	Casing Diameter (in.) <b>2</b>	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.) <b>7.6</b>	Casing Depth (ft.) <b>4</b>	Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown					
If yes, to what depth (feet)? <b>3</b>	Depth to Water (feet) <b>5</b>						

5. Material Used To Fill Well / Drillhole			From (ft.)	To (ft.)	lbs
Bentonite Chips	Surface	14	22.4		

**6. Comments**  
Monitoring Well MW-1

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <b>Rob Wilmoth - METCO</b>		License #	Date of Filling & Sealing (mm/dd/yyyy) <b>6/8/2020</b>	Date Received	Noted By
Street or Route <b>709 Gillette Street, Suite 3</b>			Telephone Number <b>( 608 ) 781-8879</b>	Comments	
City <b>La Crosse</b>	State <b>WI</b>	ZIP Code <b>54603-</b>	Signature of Person Doing Work <i>Rob Wilmoth</i>	Date Signed <b>6/9/2020</b>	

Facility/Project Name <b>Mr. P's Tire</b>	Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> E. ft. <input type="checkbox"/> S. <input type="checkbox"/> W.	Well Name <b>MW-1</b>
Facility License, Permit or Monitoring No.	Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Well Location <input type="checkbox"/>	Wis. Unique Well No. <b>VR 682</b>   DNR Well ID No.
Facility ID	Lat. "Long."	Date Well Installed <b>07/17/2017</b> m m d d y y y y
Type of Well Well Code <b>11 / MW</b>	Section Location of Waste/Source 1/4 of 1/4 of Sec. T. N, R. <input type="checkbox"/> E <input type="checkbox"/> W	Well Installed By: Name (first, last) and Firm <b>Robert Rector</b> <b>Soils &amp; Engineering Services</b>
Distance from Waste/Source _____ ft.	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	
Enf. Stds. Apply <input type="checkbox"/>	Gov. Lot Number	

A. Protective pipe, top elevation _____ ft. MSL	1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation _____ ft. MSL	2. Protective cover pipe: a. Inside diameter: <b>8.0 in.</b>
C. Land surface elevation _____ ft. MSL	b. Length: <b>1.0 ft.</b>
D. Surface seal, bottom _____ ft. MSL or <b>1.0 ft.</b>	c. Material: Steel <input checked="" type="checkbox"/> 04 Other <input type="checkbox"/>
12. USCS classification of soil near screen: GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/> SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input checked="" type="checkbox"/> CH <input type="checkbox"/> Bedrock <input type="checkbox"/>	d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, describe: _____
13. Sieve analysis performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3. Surface seal: Bentonite <input type="checkbox"/> 30 Concrete <input checked="" type="checkbox"/> 01 Other <input type="checkbox"/>
14. Drilling method used: Rotary <input type="checkbox"/> 50 Hollow Stem Auger <input checked="" type="checkbox"/> 41 Other <input type="checkbox"/>	4. Material between well casing and protective pipe: Bentonite <input checked="" type="checkbox"/> 30 Other <input type="checkbox"/>
15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input type="checkbox"/> 01 Drilling Mud <input type="checkbox"/> 03 Nonc <input checked="" type="checkbox"/> 99	5. Annular space seal: a. Granular/Chipped Bentonite <input type="checkbox"/> 33 b. _____ Lbs/gal mud weight . . . Bentonite-sand slurry <input type="checkbox"/> 35 c. _____ Lbs/gal mud weight . . . . Bentonite slurry <input type="checkbox"/> 31 d. _____ % Bentonite . . . . Bentonite-cement grout <input type="checkbox"/> 50 e. _____ Ft <sup>3</sup> volume added for any of the above f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input type="checkbox"/> 08
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Describe _____	6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33 b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 32 c. _____ Other <input type="checkbox"/>
17. Source of water (attach analysis, if required): _____	7. Fine sand material: Manufacturer, product name & mesh size a. <b>Red Flint #15</b> b. Volume added <b>0.14</b> ft <sup>3</sup>
E. Bentonite seal, top _____ ft. MSL or <b>1.0 ft.</b>	8. Filter pack material: Manufacturer, product name & mesh size a. <b>Red Flint #40</b> b. Volume added <b>3.0</b> ft <sup>3</sup>
F. Fine sand, top _____ ft. MSL or <b>3.0 ft.</b>	9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23 Flush threaded PVC schedule 80 <input type="checkbox"/> 24 Other <input type="checkbox"/>
G. Filter pack, top _____ ft. MSL or <b>3.5 ft.</b>	10. Screen material: <b>Sch. 40 PVC</b> a. Screen type: Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> 01 Other <input type="checkbox"/>
H. Screen joint, top _____ ft. MSL or <b>4.0 ft.</b>	b. Manufacturer <b>Johnson</b>
I. Well bottom _____ ft. MSL or <b>14.0 ft.</b>	c. Slot size: <b>0.010 in.</b>
J. Filter pack, bottom _____ ft. MSL or <b>15.0 ft.</b>	d. Slotted length: <b>10.0 ft.</b>
K. Borehole, bottom _____ ft. MSL or <b>15.0 ft.</b>	11. Backfill material (below filter pack): None <input checked="" type="checkbox"/> 14 Other <input type="checkbox"/>
L. Borehole, diameter <b>7.6</b> in.	
M. O.D. well casing <b>2.38</b> in.	
N. I.D. well casing <b>2.04</b> in.	

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

Signature *Steve Rector* Firm **Soils & Engineering Services, Inc.**

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

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Verification Only of Fill and Seal

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

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

<p>County: <b>MILWAUKEE</b>      WI Unique Well # of Removed Well: <b>VR683</b>      Hicap #</p> <p>Latitude / Longitude (Degrees and Minutes):  <b>43</b> ° <b>2.16</b> ' N  <b>87</b> ° <b>56.89</b> ' W</p> <p>Method Code (see instructions):</p> <p>Section: <b>25</b>      Township: <b>7 N</b>      Range: <b>21</b>      <input checked="" type="checkbox"/> E      <input type="checkbox"/> W</p> <p>Well Street Address: <b>2705 West Clybourn Street</b></p> <p>Well City, Village or Town: <b>Milwaukee</b>      Well ZIP Code: <b>53208-</b></p> <p>Subdivision Name: _____      Lot #: _____</p>	<p>Facility Name: <b>Mr. P's Tires (Former)</b></p> <p>Facility ID (FID or PWS): <b>341261030</b></p> <p>License/Permit/Monitoring #</p> <p>Original Well Owner: <b>Mark Pachefsky</b></p> <p>Present Well Owner: <b>Mark Pachefsky</b></p> <p>Mailing Address of Present Owner: <b>4475 Club Drive</b></p> <p>City of Present Owner: <b>Slinger</b>      State: <b>WI</b>      ZIP Code: <b>53086-</b></p>
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Reason For Removal From Service: **Sampling Complete**      WI Unique Well # of Replacement Well: \_\_\_\_\_

**3. Well / Drillhole / Borehole Information**

Monitoring Well      Original Construction Date (mm/dd/yyyy): **7/17/2017**  
 Water Well  
 Borehole / Drillhole      If a Well Construction Report is available, please attach.

Construction Type:  
 Drilled       Driven (Sandpoint)       Dug  
 Other (specify): \_\_\_\_\_

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

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

Formation Type:  
 Unconsolidated Formation       Bedrock

Total Well Depth From Ground Surface (ft.): **14**      Casing Diameter (in.): **2**

Lower Drillhole Diameter (in.): **7.6**      Casing Depth (ft.): **4**

Was well annular space grouted?       Yes       No       Unknown

If yes, to what depth (feet)? **3**      Depth to Water (feet): **3.45**

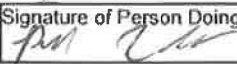
Required Method of Placing Sealing Material:  
 Conductor Pipe-Gravity       Conductor Pipe-Pumped  
 Screened & Poured (Bentonite Chips)       Other (Explain): **Gravity**

Sealing Materials:  
 Neat Cement Grout       Clay-Sand Slurry (11 lb./gal. wt.)  
 Sand-Cement (Concrete) Grout       Bentonite-Sand Slurry " "  
 Concrete       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.)	lbs	
Bentonite Chips	Surface	14	22.4	

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

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <b>Rob Wilmoth - METCO</b>	License #	Date of Filling & Sealing (mm/dd/yyyy) <b>6/8/2020</b>	Date Received	Noted By	
Street or Route <b>709 Gillette Street, Suite 3</b>	Telephone Number <b>(608) 781-8879</b>	Comments			
City <b>La Crosse</b>	State <b>WI</b>	ZIP Code <b>54603-</b>	Signature of Person Doing Work 	Date Signed <b>6/9/2020</b>	

Facility/Project Name <b>Mr. P's Tire</b>	Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> E. <input type="checkbox"/> S. <input type="checkbox"/> W.	Well Name <b>MW-2</b>
Facility License, Permit or Monitoring No.	Local Grid Origin (estimated: <input type="checkbox"/> ) or Well Location <input type="checkbox"/> Lat. " Long. " or " or "	Wis. Unique Well No. <b>VR 683</b> DNR Well ID No.
Facility ID	St. Plane ft. N. ft. E. S/C/N	Date Well Installed <b>07 / 17 / 2017</b> m m d d y y y y
Type of Well Well Code <b>11 / MW</b>	Section Location of Waste/Source 1/4 of 1/4 of Sec. T. N, R. <input type="checkbox"/> E <input type="checkbox"/> W	Well Installed By: Name (first, last) and Firm <b>Robert Rector</b> <b>Soils &amp; Engineering Services</b>
Distance from Waste/Source ft. <input type="checkbox"/> Apply <input type="checkbox"/>	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	

A. Protective pipe, top elevation	ft. MSL	1. Cap and lock?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation	ft. MSL	2. Protective cover pipe:	
C. Land surface elevation	ft. MSL	a. Inside diameter:	<u>8.0</u> in.
D. Surface seal, bottom	ft. MSL or <u>1.0</u> ft.	b. Length:	<u>1.0</u> ft.
		c. Material:	Steel <input checked="" type="checkbox"/> 04 Other <input type="checkbox"/>
12. USCS classification of soil near screen:		d. Additional protection?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/>		If yes, describe:	
SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input checked="" type="checkbox"/> CH <input type="checkbox"/>			
Bedrock <input type="checkbox"/>		3. Surface seal:	Bentonite <input type="checkbox"/> 30 Concrete <input checked="" type="checkbox"/> 01 Other <input type="checkbox"/>
13. Sieve analysis performed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4. Material between well casing and protective pipe:	Bentonite <input checked="" type="checkbox"/> 30 Other <input type="checkbox"/>
14. Drilling method used:	Rotary <input type="checkbox"/> 50 Hollow Stem Auger <input checked="" type="checkbox"/> 41 Other <input type="checkbox"/>	5. Annular space seal:	a. Granular/Chipped Bentonite <input type="checkbox"/> 33 b. Lbs/gal mud weight... Bentonite-sand slurry <input type="checkbox"/> 35 c. Lbs/gal mud weight... Bentonite slurry <input type="checkbox"/> 31 d. % Bentonite... Bentonite-cement grout <input type="checkbox"/> 50 e. Ft <sup>3</sup> volume added for any of the above
15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input type="checkbox"/> 01 Drilling Mud <input type="checkbox"/> 03 None <input checked="" type="checkbox"/> 99		f. How installed:	Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input type="checkbox"/> 08
16. Drilling additives used?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6. Bentonite seal:	a. Bentonite granules <input type="checkbox"/> 33 b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 32 c. Other <input type="checkbox"/>
Describe		7. Fine sand material: Manufacturer, product name & mesh size	<u>Red Flint #15</u>
17. Source of water (attach analysis, if required):		a. Volume added	<u>0.14</u> ft <sup>3</sup>
		8. Filter pack material: Manufacturer, product name & mesh size	<u>Red Flint #40</u>
		a. Volume added	<u>4.1</u> ft <sup>3</sup>
E. Bentonite seal, top	ft. MSL or <u>1.0</u> ft.	9. Well casing:	Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23 Flush threaded PVC schedule 80 <input type="checkbox"/> 24 Other <input type="checkbox"/>
F. Fine sand, top	ft. MSL or <u>3.0</u> ft.	10. Screen material: <u>Sch. 40 PVC</u>	a. Screen type:
G. Filter pack, top	ft. MSL or <u>3.5</u> ft.		Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> 01 Other <input type="checkbox"/>
H. Screen joint, top	ft. MSL or <u>4.0</u> ft.	b. Manufacturer	<u>Johnson</u>
I. Well bottom	ft. MSL or <u>14.0</u> ft.	c. Slot size:	<u>0.010</u> in.
J. Filter pack, bottom	ft. MSL or <u>18.0</u> ft.	d. Slotted length:	<u>10.0</u> ft.
K. Borehole, bottom	ft. MSL or <u>18.0</u> ft.	11. Backfill material (below filter pack):	None <input checked="" type="checkbox"/> 14 Other <input type="checkbox"/>
L. Borehole, diameter	<u>7.6</u> in.		
M. O.D. well casing	<u>2.38</u> in.		
N. I.D. well casing	<u>2.04</u> in.		

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

Signature *Sam Pichler* Firm Soils & Engineering Services, Inc.

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

1. Well Location Information				2. Facility / Owner Information			
County <b>MILWAUKEE</b>		WI Unique Well # of Removed Well _____ <b>VR684</b> _____	Hicap #	Facility Name Mr. P's Tires (Former)		Facility ID (FID or PWS) <b>341261030</b>	
Latitude / Longitude (Degrees and Minutes) <b>43</b> ° <b>2.16</b> ' N		Method Code (see instructions)		License/Permit/Monitoring #			
<b>87</b> ° <b>56.89</b> ' W				Original Well Owner Mark Pachefsky			
1/4 NE	1/4 SE	Section <b>25</b>	Township <b>7 N</b>	Range <b>21</b>	<input checked="" type="checkbox"/> E	Present Well Owner Mark Pachefsky	
or Gov't Lot #				<input type="checkbox"/> W		Mailing Address of Present Owner 4475 Club Drive	
Well Street Address 2705 West Clybourn Street				City of Present Owner Slinger			
Well City, Village or Town Milwaukee				Well ZIP Code 53208-		State WI	ZIP Code 53086-
Subdivision Name				Lot #			

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

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

3. Well / Drillhole / Borehole Information		4. Pump, Liner, Screen, Casing & Sealing Material	
<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>10/17/2017</b>	Pump and piping removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.	Liner(s) removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Borehole / Drillhole		Screen removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Construction Type:		Casing left in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<input checked="" type="checkbox"/> Drilled	<input type="checkbox"/> Driven (Sandpoint)	Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<input type="checkbox"/> Other (specify): _____	<input type="checkbox"/> Dug	Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Formation Type:		Did material settle after 24 hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
<input checked="" type="checkbox"/> Unconsolidated Formation	<input type="checkbox"/> Bedrock	If yes, was hole retopped?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft.) <b>14</b>	Casing Diameter (in.) <b>2</b>	If bentonite chips were used, were they hydrated with water from a known safe source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Lower Drillhole Diameter (in.) <b>7.6</b>	Casing Depth (ft.) <b>4</b>	Required Method of Placing Sealing Material	
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet) <b>3.85</b>	<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
If yes, to what depth (feet)? <b>3</b>		<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain): <u>Gravity</u>	

5. Material Used To Fill Well / Drillhole		
Bentonite Chips	From (ft.) Surface	To (ft.) 14
		lbs 22.4
6. Comments Monitoring Well MW-3		

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Rob Wilmoth - METCO	License #	Date of Filling & Sealing (mm/dd/yyyy) 6/8/2020	Date Received	Noted By	
Street or Route 709 Gillette Street, Suite 3	Telephone Number (608) 781-8879	Comments		Signature of Person Doing Work <i>Rob Wilmoth</i>	
City La Crosse	State WI	ZIP Code 54603-	Date Signed 6/9/2020		

Facility/Project Name <b>Mr. P's Tire</b>	Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> E. <input type="checkbox"/> S. <input type="checkbox"/> W.	Well Name <b>MW-3</b>
Facility License, Permit or Monitoring No.	Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Well Location <input type="checkbox"/> Lat. " Long. " or " or "	Wis. Unique Well No. <b>VR 684</b>
Facility ID	St. Plane ft. N. ft. E. S/C/N	DNR Well ID No.
Type of Well Well Code <b>11 / MW</b>	Section Location of Waste/Source 1/4 of 1/4 of Sec. T. N, R. <input type="checkbox"/> E <input type="checkbox"/> W	Date Well Installed <b>10 / 17 / 2017</b> m m d d y y y y
Distance from Waste/Source ft.	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	Well Installed By: Name (first, last) and Firm <b>Robert Rector</b> <b>Soils &amp; Engineering Services</b>
Enf. Stds. Apply <input type="checkbox"/>	Gov. Lot Number	

A. Protective pipe, top elevation	ft. MSL	1. Cap and lock?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation	ft. MSL	2. Protective cover pipe:	
C. Land surface elevation	ft. MSL	a. Inside diameter:	<b>8.0 in.</b>
D. Surface seal, bottom	ft. MSL or <b>1.0 ft.</b>	b. Length:	<b>1.0 ft.</b>
12. USCS classification of soil near screen:		c. Material:	Steel <input checked="" type="checkbox"/> 04 Other <input type="checkbox"/>
GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/>		d. Additional protection?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input checked="" type="checkbox"/> CH <input type="checkbox"/>		If yes, describe:	
Bedrock <input type="checkbox"/>		3. Surface seal:	Bentonite <input type="checkbox"/> 30 Concrete <input checked="" type="checkbox"/> 01 Other <input type="checkbox"/>
13. Sieve analysis performed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4. Material between well casing and protective pipe:	Bentonite <input checked="" type="checkbox"/> 30 Other <input type="checkbox"/>
14. Drilling method used:	Rotary <input type="checkbox"/> 50 Hollow Stem Auger <input checked="" type="checkbox"/> 41 Other <input type="checkbox"/>	5. Annular space seal:	a. Granular/Chipped Bentonite <input type="checkbox"/> 33 b. Lbs/gal mud weight... Bentonite-sand slurry <input type="checkbox"/> 35 c. Lbs/gal mud weight... Bentonite slurry <input type="checkbox"/> 31 d. % Bentonite... Bentonite-cement grout <input type="checkbox"/> 50 e. Ft <sup>3</sup> volume added for any of the above
15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input type="checkbox"/> 01 Drilling Mud <input type="checkbox"/> 03 None <input checked="" type="checkbox"/> 99		f. How installed:	Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input type="checkbox"/> 08
16. Drilling additives used?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6. Bentonite seal:	a. Bentonite granules <input type="checkbox"/> 33 b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 32 c. Other <input type="checkbox"/>
Describe		7. Fine sand material: Manufacturer, product name & mesh size	<b>Red Flint #15</b>
17. Source of water (attach analysis, if required):		a. Volume added	<b>0.14 ft<sup>3</sup></b>
E. Bentonite seal, top	ft. MSL or <b>1.0 ft.</b>	8. Filter pack material: Manufacturer, product name & mesh size	<b>Red Flint #40</b>
F. Fine sand, top	ft. MSL or <b>3.0 ft.</b>	a. Volume added	<b>3.6 ft<sup>3</sup></b>
G. Filter pack, top	ft. MSL or <b>3.5 ft.</b>	9. Well casing:	Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23 Flush threaded PVC schedule 80 <input type="checkbox"/> 24 Other <input type="checkbox"/>
H. Screen joint, top	ft. MSL or <b>4.0 ft.</b>	10. Screen material: <b>Sch. 40 PVC</b>	
I. Well bottom	ft. MSL or <b>14.0 ft.</b>	a. Screen type:	Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> 01 Other <input type="checkbox"/>
J. Filter pack, bottom	ft. MSL or <b>16.0 ft.</b>	b. Manufacturer	<b>Johnson</b>
K. Borehole, bottom	ft. MSL or <b>16.0 ft.</b>	c. Slot size:	<b>0.010 in.</b>
L. Borehole, diameter	<b>7.6 in.</b>	d. Slotted length:	<b>10.0 ft.</b>
M. O.D. well casing	<b>2.38 in.</b>	11. Backfill material (below filter pack):	None <input checked="" type="checkbox"/> 14 Other <input type="checkbox"/>
N. I.D. well casing	<b>2.04 in.</b>		

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

Signature *Steve Puchel*

Firm  
**Soils & Engineering Services, Inc.**

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

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


<input type="checkbox"/> <b>Verification Only of Fill and Seal</b>	Route to: <input type="checkbox"/> Drinking Water <input type="checkbox"/> Watershed/Wastewater <input checked="" type="checkbox"/> Remediation/Redevelopment <input type="checkbox"/> Waste Management <input type="checkbox"/> Other: _____
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1. Well Location Information	2. Facility / Owner Information
County: <b>MILWAUKEE</b> WI Unique Well # of Removed Well: <b>VR685</b> Hicap #: _____ Latitude / Longitude (Degrees and Minutes): 43 ° 2.16 ' N 87 ° 56.89 ' W Method Code (see instructions): _____ ¼/¼ NE ¼ SE Section: 25 Township: 7 N Range: 21 <input checked="" type="checkbox"/> E <input type="checkbox"/> W or Gov't Lot # _____ Well Street Address: 2705 West Clybourn Street Well City, Village or Town: Milwaukee Well ZIP Code: 53208- Subdivision Name: _____ Lot #: _____	Facility Name: <b>Mr. P's Tires (Former)</b> Facility ID (FID or PWS): <b>341261030</b> License/Permit/Monitoring #: _____ Original Well Owner: <b>Mark Pachefsky</b> Present Well Owner: <b>Mark Pachefsky</b> Mailing Address of Present Owner: <b>4475 Club Drive</b> City of Present Owner: <b>Slinger</b> State: <b>WI</b> ZIP Code: <b>53086</b>

Reason For Removal From Service: <b>Sampling Complete</b> WI Unique Well # of Replacement Well: _____	<b>4. Pump, Liner, Screen, Casing &amp; Sealing Material</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 Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<b>3. Well / Drillhole / Borehole Information</b> <input checked="" type="checkbox"/> Monitoring Well      Original Construction Date (mm/dd/yyyy): <b>10/16/2017</b> <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole      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 type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain): <u>Gravity</u>
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	Sealing Materials: <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " " <input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite Chips
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	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.): <b>14</b> Casing Diameter (in.): <b>2</b> Lower Drillhole Diameter (in.): <b>7.6</b> Casing Depth (ft.): <b>4</b>	Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown If yes, to what depth (feet)? <b>3</b> Depth to Water (feet): <b>4.98</b>

5. Material Used To Fill Well / Drillhole	From (ft.)	To (ft.)	lbs	
Bentonite Chips	Surface	14	22.4	

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

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing: <b>Rob Wilmoth - METCO</b>	License #	Date of Filling & Sealing (mm/dd/yyyy): <b>6/8/2020</b>	Date Received	Noted By	
Street or Route: <b>709 Gillette Street, Suite 3</b>	Telephone Number: <b>(608) 781-8879</b>	Comments			
City: <b>La Crosse</b>	State: <b>WI</b>	ZIP Code: <b>54603</b>	Signature of Person Doing Work: 	Date Signed: <b>6/9/2020</b>	



Facility/Project Name <b>Mr. P's Tire</b>	Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> E. <input type="checkbox"/> S. <input type="checkbox"/> W.	Well Name <b>MW-4</b>
Facility License, Permit or Monitoring No.	Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Well Location <input type="checkbox"/>	Wis. Unique Well No. <b>VR 685</b> DNR Well ID No.
Facility ID	Lat. " Long. " or	Date Well Installed <b>10 / 16 / 2017</b> m m d d y y y y
Type of Well Well Code <b>11 / mw</b>	Section Location of Waste/Source 1/4 of 1/4 of Sec. T. N, R. <input type="checkbox"/> E <input type="checkbox"/> W	Well Installed By: Name (first, last) and Firm <b>Robert Rector</b> <b>Soils &amp; Engineering Services</b>
Distance from Waste/Source ft.	Enf. Stds. Apply <input type="checkbox"/>	Gov. Lot Number
Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known		

A. Protective pipe, top elevation ----- ft. MSL	1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation ----- ft. MSL	2. Protective cover pipe: a. Inside diameter: <u>8.0</u> in. b. Length: <u>1.0</u> ft. c. Material: Steel <input checked="" type="checkbox"/> 04 Other <input type="checkbox"/>
C. Land surface elevation ----- ft. MSL	d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, describe: _____
D. Surface seal, bottom ----- ft. MSL or <u>1.0</u> ft.	3. Surface seal: Bentonite <input type="checkbox"/> 30 Concrete <input checked="" type="checkbox"/> 01 Other <input type="checkbox"/>
12. USCS classification of soil near screen: GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/> SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input checked="" type="checkbox"/> CH <input type="checkbox"/> Bedrock <input type="checkbox"/>	4. Material between well casing and protective pipe: Bentonite <input checked="" type="checkbox"/> 30 Other <input type="checkbox"/>
13. Sieve analysis performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5. Annular space seal: a. Granular/Chipped Bentonite <input type="checkbox"/> 33 b. _____ Lbs/gal mud weight . . . Bentonite-sand slurry <input type="checkbox"/> 35 c. _____ Lbs/gal mud weight . . . . Bentonite slurry <input type="checkbox"/> 31 d. _____ % Bentonite . . . . . Bentonite-cement grout <input type="checkbox"/> 50 e. _____ Ft <sup>3</sup> volume added for any of the above f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input type="checkbox"/> 08
14. Drilling method used: Rotary <input type="checkbox"/> 50 Hollow Stem Auger <input checked="" type="checkbox"/> 41 Other <input type="checkbox"/>	6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33 b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 32 c. _____ Other <input type="checkbox"/>
15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input type="checkbox"/> 01 Drilling Mud <input type="checkbox"/> 03 None <input checked="" type="checkbox"/> 99	7. Fine sand material: Manufacturer, product name & mesh size a. <b>Red Flint #15</b> b. Volume added <u>0.14</u> ft <sup>3</sup>
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Describe _____	8. Filter pack material: Manufacturer, product name & mesh size a. <b>Red Flint #40</b> b. Volume added <u>3.6</u> ft <sup>3</sup>
17. Source of water (attach analysis, if required): _____	9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23 Flush threaded PVC schedule 80 <input type="checkbox"/> 24 Other <input type="checkbox"/>
E. Bentonite seal, top ----- ft. MSL or <u>1.0</u> ft.	10. Screen material: <b>Sch. 40 PVC</b> a. Screen type: Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> 01 Other <input type="checkbox"/>
F. Fine sand, top ----- ft. MSL or <u>3.0</u> ft.	b. Manufacturer <b>Johnson</b> c. Slot size: <u>0.010</u> in. d. Slotted length: <u>10.0</u> ft.
G. Filter pack, top ----- ft. MSL or <u>3.5</u> ft.	11. Backfill material (below filter pack): None <input checked="" type="checkbox"/> 14 Other <input type="checkbox"/>
H. Screen joint, top ----- ft. MSL or <u>4.0</u> ft.	
I. Well bottom ----- ft. MSL or <u>14.0</u> ft.	
J. Filter pack, bottom ----- ft. MSL or <u>16.0</u> ft.	
K. Borehole, bottom ----- ft. MSL or <u>16.0</u> ft.	
L. Borehole, diameter <u>7.6</u> in.	
M. O.D. well casing <u>2.38</u> in.	
N. I.D. well casing <u>2.04</u> in.	

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

Signature [Signature] Firm **Soils & Engineering Services, Inc.**

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

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

<input type="checkbox"/> <b>Verification Only of Fill and Seal</b>	Route to: <input type="checkbox"/> Drinking Water <input type="checkbox"/> Watershed/Wastewater <input checked="" type="checkbox"/> Remediation/Redevelopment <input type="checkbox"/> Waste Management <input type="checkbox"/> Other: _____
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1. Well Location Information	2. Facility / Owner Information
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County <b>MILWAUKEE</b>	WI Unique Well # of Removed Well <b>VR686</b>	Hicap #	Facility Name <b>Mr. P's Tires (Former)</b>												
Latitude / Longitude (Degrees and Minutes) <b>43 ° 2.16 ' N</b> <b>87 ° 56.89 ' W</b>		Method Code (see instructions)	Facility ID (FID or PWS) <b>341261030</b>												
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">¼ NE</td> <td style="width: 10%;">¼ SE</td> <td style="width: 10%;">Section</td> <td style="width: 10%;">Township</td> <td style="width: 10%;">Range</td> <td style="width: 10%;">[X] E</td> </tr> <tr> <td></td> <td></td> <td><b>25</b></td> <td><b>7 N</b></td> <td><b>21</b></td> <td><input type="checkbox"/> W</td> </tr> </table>		¼ NE	¼ SE	Section	Township	Range	[X] E			<b>25</b>	<b>7 N</b>	<b>21</b>	<input type="checkbox"/> W	License/Permit/Monitoring #	
¼ NE	¼ SE	Section	Township	Range	[X] E										
		<b>25</b>	<b>7 N</b>	<b>21</b>	<input type="checkbox"/> W										
Well Street Address <b>2705 West Clybourn Street</b>			Original Well Owner <b>Mark Pachefsky</b>												
Well City, Village or Town <b>Milwaukee</b>			Present Well Owner <b>Mark Pachefsky</b>												
Subdivision Name			Mailing Address of Present Owner <b>4475 Club Drive</b>												
Well ZIP Code <b>53208-</b>			City of Present Owner <b>Slinger</b>												
Lot #			State <b>WI</b>												
			ZIP Code <b>53086-</b>												


Reason For Removal From Service <b>Sampling Complete</b>	WI Unique Well # of Replacement Well
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3. Well / Drillhole / Borehole Information	4. Pump, Liner, Screen, Casing & Sealing Material
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<input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole	Original Construction Date (mm/dd/yyyy) <b>10/16/2017</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 Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____		Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
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 type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain): <u>Gravity</u>	
Total Well Depth From Ground Surface (ft.) <b>14</b> Casing Diameter (in.) <b>2</b>		Sealing Materials <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " " <input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite Chips	
Lower Drillhole Diameter (in.) <b>7.6</b> Casing Depth (ft.) <b>4</b>		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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown			
If yes, to what depth (feet)? <b>3</b>		Depth to Water (feet) <b>3.73</b>	

5. Material Used To Fill Well / Drillhole	From (ft.)	To (ft.)	lbs	
Bentonite Chips	Surface	14	22.4	

**6. Comments**  
Monitoring Well MW-5

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <b>Rob Wilmoth - METCO</b>	License #	Date of Filling & Sealing (mm/dd/yyyy) <b>6/8/2020</b>	Date Received	Noted By	
Street or Route <b>709 Gillette Street, Suite 3</b>			Telephone Number <b>(608) 781-8879</b>		Comments
City <b>La Crosse</b>	State <b>WI</b>	ZIP Code <b>54603-</b>	Signature of Person Doing Work 		Date Signed <b>6/9/2020</b>

Facility/Project Name <b>Mr. P's Tire</b>	Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> S. <input type="checkbox"/> E. <input type="checkbox"/> W.	Well Name <b>MW-5</b>
Facility License, Permit or Monitoring No.	Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Well Location <input type="checkbox"/> Lat. " Long. " or " or "	Wis. Unique Well No. <b>VR 686</b> DNR Well ID No.
Facility ID	St. Plane ft. N. ft. E. S/C/N	Date Well Installed <b>10 / 16 / 2017</b> m m d d y y y y
Type of Well Well Code <b>11 / mw</b>	Section Location of Waste/Source 1/4 of 1/4 of Sec. T. N, R. <input type="checkbox"/> E <input type="checkbox"/> W	Well Installed By: Name (first, last) and Firm <b>Robert Rector</b> <b>Soils &amp; Engineering Services</b>
Distance from Waste/Source ft. Apply <input type="checkbox"/>	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	

A. Protective pipe, top elevation	ft. MSL	1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation	ft. MSL	2. Protective cover pipe: a. Inside diameter: <u>8.0</u> in. b. Length: <u>1.0</u> ft. c. Material: Steel <input checked="" type="checkbox"/> 04 Other <input type="checkbox"/>
C. Land surface elevation	ft. MSL	d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, describe:
D. Surface seal, bottom	ft. MSL or <u>1.0</u> ft.	3. Surface seal: Bentonite <input type="checkbox"/> 30 Concrete <input checked="" type="checkbox"/> 01 Other <input type="checkbox"/>
12. USCS classification of soil near screen: GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/> SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input checked="" type="checkbox"/> CH <input type="checkbox"/> Bedrock <input type="checkbox"/>		4. Material between well casing and protective pipe: Bentonite <input checked="" type="checkbox"/> 30 Other <input type="checkbox"/>
13. Sieve analysis performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		5. Annular space seal: a. Granular/Chipped Bentonite <input type="checkbox"/> 33 b. <u>    </u> Lbs/gal mud weight . . . Bentonite-sand slurry <input type="checkbox"/> 35 c. <u>    </u> Lbs/gal mud weight . . . Bentonite slurry <input type="checkbox"/> 31 d. <u>    </u> % Bentonite . . . . . Bentonite-cement grout <input type="checkbox"/> 50 e. <u>    </u> Ft <sup>3</sup> volume added for any of the above
14. Drilling method used: Rotary <input type="checkbox"/> 50 Hollow Stem Auger <input checked="" type="checkbox"/> 41 Other <input type="checkbox"/>		f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input type="checkbox"/> 08
15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input type="checkbox"/> 01 Drilling Mud <input type="checkbox"/> 03 None <input checked="" type="checkbox"/> 99		6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33 b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 32 c. <u>    </u> Other <input type="checkbox"/>
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		7. Fine sand material: Manufacturer, product name & mesh size a. <u>Red Flint #15</u> b. Volume added <u>0.14</u> ft <sup>3</sup>
Describe <u>    </u>		8. Filter pack material: Manufacturer, product name & mesh size a. <u>Red Flint #40</u> b. Volume added <u>3.6</u> ft <sup>3</sup>
17. Source of water (attach analysis, if required): <u>    </u>		9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23 Flush threaded PVC schedule 80 <input type="checkbox"/> 24 Other <input type="checkbox"/>
E. Bentonite seal, top	ft. MSL or <u>1.0</u> ft.	10. Screen material: <u>Sch. 40 PVC</u> a. Screen type: Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> 01 Other <input type="checkbox"/>
F. Fine sand, top	ft. MSL or <u>3.0</u> ft.	b. Manufacturer <u>Johnson</u>
G. Filter pack, top	ft. MSL or <u>3.5</u> ft.	c. Slot size: <u>0.010</u> in.
H. Screen joint, top	ft. MSL or <u>4.0</u> ft.	d. Slotted length: <u>10.0</u> ft.
I. Well bottom	ft. MSL or <u>14.0</u> ft.	11. Backfill material (below filter pack): None <input checked="" type="checkbox"/> 14 Other <input type="checkbox"/>
J. Filter pack, bottom	ft. MSL or <u>16.0</u> ft.	
K. Borehole, bottom	ft. MSL or <u>16.0</u> ft.	
L. Borehole, diameter	<u>7.6</u> in.	
M. O.D. well casing	<u>2.38</u> in.	
N. I.D. well casing	<u>2.04</u> in.	

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

Signature *Tom Procher* Firm **Soils & Engineering Services, Inc.**

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

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Verification Only of Fill and Seal

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

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

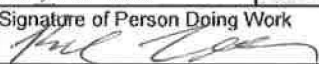
County <b>MILWAUKEE</b>	WI Unique Well # of Removed Well <b>VR687</b>	Hicap #	Facility Name <b>Mr. P's Tires (Former)</b>
Latitude / Longitude (Degrees and Minutes) <b>43 ° 2.16 ' N</b> <b>87 ° 56.89 ' W</b>	Method Code (see instructions)	Facility ID (FID or PWS) <b>341261030</b>	License/Permit/Monitoring #
1/4 NE    1/4 SE    Section <b>25</b> Township <b>7 N</b> Range <b>21</b> <input checked="" type="checkbox"/> E <input type="checkbox"/> W	Well Street Address <b>2705 West Clybourn Street</b>	Original Well Owner <b>Mark Pachefsky</b>	Present Well Owner <b>Mark Pachefsky</b>
Well City, Village or Town <b>Milwaukee</b>	Well ZIP Code <b>53208-</b>	Mailing Address of Present Owner <b>4475 Club Drive</b>	City of Present Owner <b>Slinger</b> State <b>WI</b> ZIP Code <b>53086-</b>
Subdivision Name	Lot #	Reason For Removal From Service <b>Sampling Complete</b>	WI Unique Well # of Replacement Well

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

<input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole	Original Construction Date (mm/dd/yyyy) <b>10/16/2017</b>	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	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		Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft.) <b>14</b>	Casing Diameter (in.) <b>2</b>	Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Lower Drillhole Diameter (in.) <b>7.6</b>	Casing Depth (ft.) <b>4</b>	Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		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)? <b>3</b>	Depth to Water (feet) <b>9.58</b>	Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
		If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
		If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
		Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain): <b>Gravity</b>
		Sealing Materials <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " " <input type="checkbox"/> Concrete <input 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.)	lbs
Bentonite Chips	Surface	14	22.4

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

<b>7. Supervision of Work</b>			<b>DNR Use Only</b>	
Name of Person or Firm Doing Filling & Sealing <b>Rob Wilmoth - METCO</b>	License #	Date of Filling & Sealing (mm/dd/yyyy) <b>6/8/2020</b>	Date Received	Noted By
Street or Route <b>709 Gillette Street, Suite 3</b>	Telephone Number <b>( 608 ) 781-8879</b>	Comments		
City <b>La Crosse</b>	State <b>WI</b>	ZIP Code <b>54603-</b>	Signature of Person Doing Work 	Date Signed <b>6/9/2020</b>

Facility/Project Name <b>Mr. P's Tire</b>	Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> S. <input type="checkbox"/> E. <input type="checkbox"/> W.	Well Name <b>MW-6</b>
Facility License, Permit or Monitoring No.	Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/> ) or Well Location <input type="checkbox"/> Lat. " Long. " or "	Wis. Unique Well No. <b>VIL 687</b> DNR Well ID No.
Facility ID	St. Plane _____ ft. N. _____ ft. E. S/C/N	Date Well Installed <b>10 / 16 / 2017</b> m m d d y y v v v y
Type of Well Well Code <b>11 / mw</b>	Section Location of Waste/Source 1/4 of _____ 1/4 of Sec. _____ T. _____ N, R. <input type="checkbox"/> E <input type="checkbox"/> W	Well Installed By: Name (first, last) and Firm <b>Robert Rector</b> <b>Soils &amp; Engineering Services</b>
Distance from Waste/Source _____ ft. Apply <input type="checkbox"/>	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	

A. Protective pipe, top elevation _____ ft. MSL	1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation _____ ft. MSL	2. Protective cover pipe: a. Inside diameter: <b>8.0 in.</b> b. Length: <b>1.0 ft.</b> c. Material: Steel <input type="checkbox"/> 04 Other <input type="checkbox"/>
C. Land surface elevation _____ ft. MSL	d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, describe: _____
D. Surface seal, bottom _____ ft. MSL or <b>1.5 ft.</b>	3. Surface seal: Bentonite <input type="checkbox"/> 30 Concrete <input checked="" type="checkbox"/> 01 Other <input type="checkbox"/>
12. USCS classification of soil near screen: GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/> SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input checked="" type="checkbox"/> CH <input type="checkbox"/> Bedrock <input type="checkbox"/>	4. Material between well casing and protective pipe: Bentonite <input checked="" type="checkbox"/> 30 Other <input type="checkbox"/>
13. Sieve analysis performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5. Annular space seal: a. Granular/Chipped Bentonite <input type="checkbox"/> 33 b. _____ Lbs/gal mud weight . . . Bentonite-sand slurry <input type="checkbox"/> 35 c. _____ Lbs/gal mud weight . . . Bentonite slurry <input type="checkbox"/> 31 d. _____ % Bentonite . . . . . Bentonite-cement grout <input type="checkbox"/> 50 e. _____ Ft <sup>3</sup> volume added for any of the above
14. Drilling method used: Rotary <input type="checkbox"/> 50 Hollow Stem Auger <input checked="" type="checkbox"/> 41 Other <input type="checkbox"/>	f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input type="checkbox"/> 08
15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input type="checkbox"/> 01 Drilling Mud <input type="checkbox"/> 03 None <input checked="" type="checkbox"/> 99	6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33 b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 32 c. _____ Other <input type="checkbox"/>
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Describe _____	7. Fine sand material: Manufacturer, product name & mesh size a. <b>Red Flint #15</b> b. Volume added <b>0.14</b> ft <sup>3</sup>
17. Source of water (attach analysis, if required): _____	8. Filter pack material: Manufacturer, product name & mesh size a. <b>Red Flint #40</b> b. Volume added <b>3.6</b> ft <sup>3</sup>
E. Bentonite seal, top _____ ft. MSL or <b>1.5 ft.</b>	9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23 Flush threaded PVC schedule 80 <input type="checkbox"/> 24 Other <input type="checkbox"/>
F. Fine sand, top _____ ft. MSL or <b>3.0 ft.</b>	10. Screen material: <b>Sch. 40 PVC</b> a. Screen type: Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> 01 Other <input type="checkbox"/>
G. Filter pack, top _____ ft. MSL or <b>3.5 ft.</b>	b. Manufacturer <b>Johnson</b> c. Slot size: <b>0.010 in.</b> d. Slotted length: <b>10.0 ft.</b>
H. Screen joint, top _____ ft. MSL or <b>4.0 ft.</b>	11. Backfill material (below filter pack): None <input checked="" type="checkbox"/> 14 Other <input type="checkbox"/>
I. Well bottom _____ ft. MSL or <b>14.0 ft.</b>	
J. Filter pack, bottom _____ ft. MSL or <b>16.0 ft.</b>	
K. Borehole, bottom _____ ft. MSL or <b>16.0 ft.</b>	
L. Borehole, diameter <b>7.6</b> in.	
M. O.D. well casing <b>2.38</b> in.	
N. I.D. well casing <b>2.04</b> in.	

I hereby certify that the information on this form is true and correct to the best of my knowledge.  
Signature *Gene Pruebel* Firm Soils & Engineering Services, Inc.

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