

**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:**

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

**Verification Only of Fill and Seal**

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

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

Latitude / Longitude (see instructions): 42.78666 N, 87.80771 W

Format Code:  DD      Method Code:  GPS008,  SCR002,  OTH001

Section: 20      Township: 4 N      Range: 23 E

Well Street Address: 5131 Douglas Avenue

Well City, Village or Town: Racine      Well ZIP Code: 53402

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

Facility Name: Greentree Cleaners

Facility ID (FID or PWS): 252138700

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

Original Well Owner: Greentree Station LLC, c/o Phillips Edison & Company

Present Well Owner: Greentree Station LLC, c/o Phillips Edison & Company

Mailing Address of Present Owner: 11501 Northlake Drive

City of Present Owner: Cincinnati      State: OH      ZIP Code: 45249

Reason for Removal from Service: Remediation Complete

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

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

Monitoring Well      Original Construction Date (mm/dd/yyyy): \_\_\_\_\_

Water Well

Borehole / Drillhole

If a Well Construction Report is available, please attach.

Construction Type:  Drilled       Driven (Sandpoint)       Dug

Other (specify): \_\_\_\_\_

Formation Type:  Unconsolidated Formation       Bedrock

Total Well Depth From Ground Surface (ft.): 20      Casing Diameter (in.): 2"

Lower Drillhole Diameter (in.): 8"      Casing Depth (ft.): 10'

Was well annular space grouted?  Yes       No       Unknown

If yes, to what depth (feet)? 1'      Depth to Water (feet): 15'

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

Pump and piping removed?  Yes       No       N/A

Liner(s) removed?  Yes       No       N/A

Liner(s) perforated?  Yes       No       N/A

Screen removed?  Yes       No       N/A

Casing left in place?  Yes       No       N/A

Was casing cut off below surface?  Yes       No       N/A

Did sealing material rise to surface?  Yes       No       N/A

Did material settle after 24 hours?  Yes       No       N/A

If yes, was hole retopped?  Yes       No       N/A

If bentonite chips were used, were they hydrated with water from a known safe source?  Yes       No       N/A

Required Method of Placing Sealing Material:  Conductor Pipe-Gravity       Conductor Pipe-Pumped

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

Sealing Materials:  Neat Cement Grout       Concrete

Sand-Cement (Concrete) Grout       Bentonite Chips

For Monitoring Wells and Monitoring Well Boreholes Only:

Bentonite Chips       Bentonite - Cement Grout

Granular Bentonite       Bentonite - Sand Slurry

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

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface	1'		
1'	0'		

**6. Comments**

\_\_\_\_\_

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

Name of Person or Firm Doing Filling & Sealing: CS Drury      License #: N/A      Date of Filling & Sealing or Verification (mm/dd/yyyy): 11/13/12

Street or Route: PO Box 294      Telephone Number: (630) 789-2800

City: Huntsville      State: IL      ZIP Code: 60522

Signature of Person Doing Work: \_\_\_\_\_      Date Signed: 11/30/12

Date Received: \_\_\_\_\_      Noted By: \_\_\_\_\_

Comments: \_\_\_\_\_

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

**Verification Only of Fill and Seal**

**Route to DNR Bureau:**

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

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

County: **Racine**      WI Unique Well # of Removed Well: \_\_\_\_\_      Hicap #: \_\_\_\_\_  
 Latitude / Longitude (see instructions):  
 42.78674 N      Format Code:  DD      Method Code:  GPS008  
 87.80684 W       DDM       SCR002       OTH001  
 Section: **20**      Township: **4 N**      Range: **23**       E       W  
 Well Street Address: **5131 Douglas Avenue**  
 Well City, Village or Town: **Racine**      Well ZIP Code: **53402**  
 Subdivision Name: \_\_\_\_\_      Lot #: \_\_\_\_\_

Facility Name: **Greentree Cleaners**  
 Facility ID (FID or PWS): **252138700**  
 License/Permit/Monitoring #: \_\_\_\_\_  
 Original Well Owner: **Greentree Station LLC, c/o Phillips Edison & Company**  
 Present Well Owner: **Greentree Station LLC, c/o Phillips Edison & Company**  
 Mailing Address of Present Owner: **11501 Northlake Drive**  
 City of Present Owner: **Cincinnati**      State: **OH**      ZIP Code: **45249**

Reason for Removal from Service: **Remediation Complete**      WI Unique Well # of Replacement Well: \_\_\_\_\_

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

Monitoring Well      Original Construction Date (mm/dd/yyyy): \_\_\_\_\_  
 Water Well      If a Well Construction Report is available, please attach.  
 Borehole / Drillhole  
 Construction Type:  
 Drilled       Driven (Sandpoint)       Dug  
 Other (specify): \_\_\_\_\_  
 Formation Type:  
 Unconsolidated Formation       Bedrock  
 Total Well Depth From Ground Surface (ft.): **20'**      Casing Diameter (in.): **2"**  
 Lower Drillhole Diameter (in.): **8"**      Casing Depth (ft.): **10'**  
 Was well annular space grouted?  Yes       No       Unknown  
 If yes, to what depth (feet)? **1'**      Depth to Water (feet): **15'**

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

Pump and piping removed?  Yes       No       N/A  
 Liner(s) removed?  Yes       No       N/A  
 Liner(s) perforated?  Yes       No       N/A  
 Screen removed?  Yes       No       N/A  
 Casing left in place?  Yes       No       N/A  
 Was casing cut off below surface?  Yes       No       N/A  
 Did sealing material rise to surface?  Yes       No       N/A  
 Did material settle after 24 hours?  Yes       No       N/A  
 If yes, was hole retopped?  Yes       No       N/A  
 If bentonite chips were used, were they hydrated with water from a known safe source?  Yes       No       N/A  
 Required Method of Placing Sealing Material:  
 Conductor Pipe-Gravity       Conductor Pipe-Pumped  
 Screened & Poured (Bentonite Chips)       Other (Explain): \_\_\_\_\_  
 Sealing Materials:  
 Neat Cement Grout       Concrete  
 Sand-Cement (Concrete) Grout       Bentonite Chips  
 For Monitoring Wells and Monitoring Well Boreholes Only:  
 Bentonite Chips       Bentonite - Cement Grout  
 Granular Bentonite       Bentonite - Sand Slurry

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

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface	1'		
1'	0'		

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface	1'		
1'	0'		

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing: **CS Drilling**      License #: **N/A**      Date of Filling & Sealing or Verification (mm/dd/yyyy): **11/14/2022**  
 Street or Route: **PO Box 294**      Telephone Number: **(603) 789-0800**  
 City: **HANSDALE**      State: **IL**      ZIP Code: **60522**      Signature of Person Doing Work: \_\_\_\_\_      Date Signed: **11/30/2022**

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**Verification Only of Fill and Seal**

**Route to DNR Bureau:**

Drinking Water       Watershed/Wastewater       Remediation/Redevelopment

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

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

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

Latitude / Longitude (see instructions):  
42.80663 N      87.80681 W

Format Code:  DD       DDM  
Method Code:  GPS008       SCR002       OTH001

Section: 20      Township: 4 N      Range: 23 E

Well Street Address: 5131 Douglas Avenue

Well City, Village or Town: Racine      Well ZIP Code: 53402

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

Facility Name: Greentree Cleaners

Facility ID (FID or PWS): 252138700

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

Original Well Owner: Greentree Station LLC, c/o Phillips Edison & Company

Present Well Owner: Greentree Station LLC, c/o Phillips Edison & Company

Mailing Address of Present Owner: 11501 Northlake Drive

City of Present Owner: Cincinnati      State: OH      ZIP Code: 45249

Reason for Removal from Service: Remediation Complete

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

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

Monitoring Well       Water Well       Borehole / Drillhole

Original Construction Date (mm/dd/yyyy): \_\_\_\_\_

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

Construction Type:  Drilled       Driven (Sandpoint)       Dug

Other (specify): \_\_\_\_\_

Formation Type:  Unconsolidated Formation       Bedrock

Total Well Depth From Ground Surface (ft.): 20'      Casing Diameter (in.): 2"

Lower Drillhole Diameter (in.): 8"      Casing Depth (ft.): 10'

Was well annular space grouted?  Yes       No       Unknown

If yes, to what depth (feet)? 1'      Depth to Water (feet): 15'

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

Pump and piping removed?  Yes       No       N/A

Liner(s) removed?  Yes       No       N/A

Liner(s) perforated?  Yes       No       N/A

Screen removed?  Yes       No       N/A

Casing left in place?  Yes       No       N/A

Was casing cut off below surface?  Yes       No       N/A

Did sealing material rise to surface?  Yes       No       N/A

Did material settle after 24 hours?  Yes       No       N/A

If yes, was hole retopped?  Yes       No       N/A

If bentonite chips were used, were they hydrated with water from a known safe source?  Yes       No       N/A

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

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

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

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

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface	1'		
1'	0'		

**6. Comments**

\_\_\_\_\_

**7. Supervision of Work**

Name of Person or Firm Doing Filling & Sealing: CS Drilling      License #: WIA      Date of Filling & Sealing or Verification (mm/dd/yyyy): 11/4/2022

Street or Route: PO Box 294      Telephone Number: (630) 789-0800

City: Hinsdale      State: IL      ZIP Code: 60522      Signature of Person Doing Work: \_\_\_\_\_      Date Signed: 11/30/2022

**DNR Use Only**

Date Received: \_\_\_\_\_      Noted By: \_\_\_\_\_

Comments: \_\_\_\_\_

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**Verification Only of Fill and Seal**

**Route to DNR Bureau:**

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

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

County <b>Racine</b>		WI Unique Well # of Removed Well	Hicap #	Facility Name <b>Greentree Cleaners</b>	
Latitude / Longitude (see instructions) 42.78659 N 87.80700 W		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS) <b>252138700</b>	
1/4 / 1/4 SE or Gov't Lot #	Section <b>20</b>	Township <b>4 N</b>	Range <b>23</b>	License/Permit/Monitoring #	
Well Street Address <b>5131 Douglas Avenue</b>		Original Well Owner <b>Greentree Station LLC, c/o Phillips Edison &amp; Company</b>		Present Well Owner <b>Greentree Station LLC, c/o Phillips Edison &amp; Company</b>	
Well City, Village or Town <b>Racine</b>		Well ZIP Code <b>53402</b>		Mailing Address of Present Owner <b>11501 Northlake Drive</b>	
Subdivision Name		Lot #		City of Present Owner <b>Cincinnati</b>	State <b>OH</b> ZIP Code <b>45249</b>

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

Reason for Removal from Service <b>Remediation Complete</b>		WI Unique Well # of Replacement Well	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Screen removed? <input checked="" type="checkbox"/> Yes <input 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If yes, was hole retopped? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If bentonite chips were used, were they hydrated with water from a known safe source? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
<input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy)	Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____		
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.		Sealing Materials <input type="checkbox"/> Neat Cement Grout <input checked="" type="checkbox"/> Concrete <input type="checkbox"/> Sand-Cement (Concrete) Grout <input checked="" type="checkbox"/> Bentonite Chips	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		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>20'</b>	Casing Diameter (in.) <b>2"</b>	Lower Drillhole Diameter (in.) <b>8"</b>	Casing Depth (ft.) <b>10'</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>1'</b> Depth to Water (feet) <b>15'</b>	

5. Material Used to Fill Well / Drillhole			
From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface	1'		
1'	2'		

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing <b>CS Drury</b>		License # <b>N/A</b>	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>11/14/2022</b>	Date Received	Noted By
Street or Route <b>PO Box 244</b>		Telephone Number <b>(630) 789-0800</b>		Comments	
City <b>Hinsdale</b>	State <b>IL</b>	ZIP Code <b>62522</b>	Signature of Person Doing Work <i>[Signature]</i>	Date Signed <b>11/30/22</b>	

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**Verification Only of Fill and Seal**

**Route to DNR Bureau:**

Drinking Water       Watershed/Wastewater       Remediation/Redevelopment

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

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

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

Latitude / Longitude (see instructions):  
42.78672 N      Format Code:  DD      Method Code:  GPS008  
87.80807 W       DDM       SCR002       OTH001

1/4 / 1/4 SE or Gov't Lot #: \_\_\_\_\_      1/4 SW: \_\_\_\_\_      Section: 20      Township: 4 N      Range: 23 E       W

Well Street Address: 5131 Douglas Avenue

Well City, Village or Town: Racine      Well ZIP Code: 53402

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

Facility Name: Greentree Cleaners

Facility ID (FID or PWS): 252138700

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

Original Well Owner: Greentree Station LLC, c/o Phillips Edison & Company

Present Well Owner: Greentree Station LLC, c/o Phillips Edison & Company

Mailing Address of Present Owner: 11501 Northlake Drive

City of Present Owner: Cincinnati      State: OH      ZIP Code: 45249

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

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

Monitoring Well      Original Construction Date (mm/dd/yyyy): \_\_\_\_\_

Water Well

Borehole / Drillhole

If a Well Construction Report is available, please attach.

Construction Type:  
 Drilled       Driven (Sandpoint)       Dug

Other (specify): \_\_\_\_\_

Formation Type:  
 Unconsolidated Formation       Bedrock

Total Well Depth From Ground Surface (ft.): 20'      Casing Diameter (in.): 2"

Lower Drillhole Diameter (in.): 8"      Casing Depth (ft.): 15'

Was well annular space grouted?  Yes       No       Unknown

If yes, to what depth (feet)? 1'      Depth to Water (feet): 15'

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

Pump and piping removed?  Yes       No       N/A

Liner(s) removed?  Yes       No       N/A

Liner(s) perforated?  Yes       No       N/A

Screen removed?  Yes       No       N/A

Casing left in place?  Yes       No       N/A

Was casing cut off below surface?  Yes       No       N/A

Did sealing material rise to surface?  Yes       No       N/A

Did material settle after 24 hours?  Yes       No       N/A

If yes, was hole retopped?  Yes       No       N/A

If bentonite chips were used, were they hydrated with water from a known safe source?  Yes       No       N/A

**Required Method of Placing Sealing Material**

Conductor Pipe-Gravity       Conductor Pipe-Pumped

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

**Sealing Materials**

Neat Cement Grout       Concrete

Sand-Cement (Concrete) Grout       Bentonite Chips

**For Monitoring Wells and Monitoring Well Boreholes Only:**

Bentonite Chips       Bentonite - Cement Grout

Granular Bentonite       Bentonite - Sand Slurry

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

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface	1'		
1'	20'		

**6. Comments**

\_\_\_\_\_

**7. Supervision of Work**

Name of Person or Firm Doing Filling & Sealing: CS Drilling      License #: N/A      Date of Filling & Sealing or Verification (mm/dd/yyyy): 11/14/2022

Street or Route: PO Box 294      Telephone Number: (603) 789-0800

City: Hillsdale      State: IL      ZIP Code: 60322      Signature of Person Doing Work: \_\_\_\_\_      Date Signed: 11/30/22

**DNR Use Only**

Date Received: \_\_\_\_\_      Noted By: \_\_\_\_\_

Comments: \_\_\_\_\_



**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:**

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

**Verification Only of Fill and Seal**

**1. Well Location Information**

County <b>Racine</b>		WI Unique Well # of Removed Well	Hicap #
Latitude / Longitude (see instructions) 42.78663 N 87.80721 W		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001
1/4 / 1/4 SE or Gov't Lot #	1/4 SW	Section <b>20</b>	Township <b>4 N</b>
Well Street Address <b>5131 Douglas Avenue</b>		Range <b>23 N</b>	<input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well City, Village or Town <b>Racine</b>		Well ZIP Code <b>53402</b>	
Subdivision Name		Lot #	

**2. Facility / Owner Information**

Facility Name <b>Greentree Cleaners</b>		
Facility ID (FID or PWS) <b>252138700</b>		
License/Permit/Monitoring #		
Original Well Owner <b>Greentree Station LLC, c/o Phillips Edison &amp; Company</b>		
Present Well Owner <b>Greentree Station LLC, c/o Phillips Edison &amp; Company</b>		
Mailing Address of Present Owner <b>11501 Northlake Drive</b>		
City of Present Owner <b>Cincinnati</b>	State <b>OH</b>	ZIP Code <b>45249</b>

Reason for Removal from Service <b>Remediation Complete</b>	WI Unique Well # of Replacement Well
----------------------------------------------------------------	--------------------------------------

**3. Filled & Sealed 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)
If a Well Construction Report is available, please attach.	
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>20'</b>	Casing Diameter (in.) <b>2"</b>
Lower Drillhole Diameter (in.) <b>8"</b>	Casing Depth (ft.) <b>10'</b>
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet) <b>15'</b>

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

Pump and piping removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Screen removed?	<input checked="" type="checkbox"/> Yes <input 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? If yes, was hole retopped?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____	

Sealing Materials <input type="checkbox"/> Neat Cement Grout <input checked="" type="checkbox"/> Concrete <input type="checkbox"/> Sand-Cement (Concrete) Grout <input checked="" type="checkbox"/> Bentonite Chips	
For Monitoring Wells and Monitoring Well Boreholes Only: <input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout <input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry	

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

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface	1'		
1'	0'		

**6. Comments**

**7. Supervision of Work**

Name of Person or Firm Doing Filling & Sealing <b>CS Drury</b>	License # <b>N/A</b>	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>11/14/2022</b>	<b>DNR Use Only</b>	
Street or Route <b>PO Box 894</b>		Telephone Number <b>(630) 789-2800</b>	Date Received	Noted By
City <b>Hinsdale</b>	State <b>IL</b>	ZIP Code <b>60522</b>	Comments	
Signature of Person Doing Work <i>[Signature]</i>			Date Signed <b>11/30/22</b>	

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

**Verification Only of Fill and Seal**

**Route to DNR Bureau:**

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

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

County: **Racine**      WI Unique Well # of Removed Well: \_\_\_\_\_      Hicap #: \_\_\_\_\_  
 Latitude / Longitude (see instructions):  
 42.78632 N      Format Code:  DD      Method Code:  GPS008  
 87.80690 W       DDM       SCR002       OTH001  
 1/4 SE or Gov't Lot #: \_\_\_\_\_      1/4 SW: \_\_\_\_\_      Section: **20**      Township: **4 N**      Range: **23**       E       W  
 Well Street Address: **5131 Douglas Avenue**  
 Well City, Village or Town: **Racine**      Well ZIP Code: **53402**  
 Subdivision Name: \_\_\_\_\_      Lot #: \_\_\_\_\_  
 Reason for Removal from Service: **Remediation Complete**      WI Unique Well # of Replacement Well: \_\_\_\_\_

Facility Name: **Greentree Cleaners**  
 Facility ID (FID or PWS): **252138700**  
 License/Permit/Monitoring #: \_\_\_\_\_  
 Original Well Owner: **Greentree Station LLC, c/o Phillips Edison & Company**  
 Present Well Owner: **Greentree Station LLC, c/o Phillips Edison & Company**  
 Mailing Address of Present Owner: **11501 Northlake Drive**  
 City of Present Owner: **Cincinnati**      State: **OH**      ZIP Code: **45249**

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

Monitoring Well      Original Construction Date (mm/dd/yyyy): \_\_\_\_\_  
 Water Well      If a Well Construction Report is available, please attach.  
 Borehole / Drillhole  
 Construction Type:  
 Drilled       Driven (Sandpoint)       Dug  
 Other (specify): \_\_\_\_\_  
 Formation Type:  
 Unconsolidated Formation       Bedrock  
 Total Well Depth From Ground Surface (ft.): **20'**      Casing Diameter (in.): **2"**  
 Lower Drillhole Diameter (in.): **8"**      Casing Depth (ft.): **10'**  
 Was well annular space grouted?  Yes       No       Unknown  
 If yes, to what depth (feet)? **1'**      Depth to Water (feet): **15'**

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

Pump and piping removed?  Yes       No       N/A  
 Liner(s) removed?  Yes       No       N/A  
 Liner(s) perforated?  Yes       No       N/A  
 Screen removed?  Yes       No       N/A  
 Casing left in place?  Yes       No       N/A  
 Was casing cut off below surface?  Yes       No       N/A  
 Did sealing material rise to surface?  Yes       No       N/A  
 Did material settle after 24 hours?  Yes       No       N/A  
 If yes, was hole retopped?  Yes       No       N/A  
 If bentonite chips were used, were they hydrated with water from a known safe source?  Yes       No       N/A  
 Required Method of Placing Sealing Material:  
 Conductor Pipe-Gravity       Conductor Pipe-Pumped  
 Screened & Poured (Bentonite Chips)       Other (Explain): \_\_\_\_\_  
 Sealing Materials:  
 Neat Cement Grout       Concrete  
 Sand-Cement (Concrete) Grout       Bentonite Chips  
 For Monitoring Wells and Monitoring Well Boreholes Only:  
 Bentonite Chips       Bentonite - Cement Grout  
 Granular Bentonite       Bentonite - Sand Slurry

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

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface	1'		
1'	0'		

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface	1'		
1'	0'		

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing: **C.S. Drilling**      License #: **N/A**      Date of Filling & Sealing or Verification (mm/dd/yyyy): **11/14/2022**  
 Street or Route: **PO Box 294 - Hat**      Telephone Number: **(630) 789-0800**  
 City: **HINSDALE**      State: **IL**      ZIP Code: **60522**      Signature of Person Doing Work: \_\_\_\_\_      Date Signed: **11/30/22**