



June 6, 2018

Ms. Nancy Ryan c/o Mr. Chue Yee Yang, Environmental Program Associate Wisconsin Department of Natural Resources Remediation & Redevelopment Program 2300 N. Dr. Martin Luther King Jr. Drive Milwaukee, WI 53212

Subject:

Monitoring Well Abandonment Forms

MSOE Diercks Computational Science Hall Development

1025 N. Milwaukee Street, Milwaukee, WI 53202

WDNR BRRTS #02-41-581016, WDNR FID #241343410

Dear Ms. Ryan:

On behalf of Milwaukee School of Engineering (MSOE), The Sigma Group, Inc. (Sigma) conducted a second groundwater sampling event at the property referenced above (hereinafter the "Site") on May 14, 2018. Sigma transmitted the groundwater analytical data to the Wisconsin Department of Natural Resources (WDNR) in a May 25th email and recommended that the five groundwater monitoring wells (MW-1 through MW-5) be abandoned due to the lack of impacts above NR 140 Enforcement Standards and the pending Site construction. WDNR issued a May 31st email which concurred that no additional groundwater monitoring will be required for the Site and that the monitoring wells may be abandoned.

On June 1, 2018, Sigma abandoned monitoring wells MW-1 through MW-5 with bentonite chips in accordance with NR 141 regulations. Copies of the well abandonment forms (WDNR Form 3300-5, revised 4/2015) are included in **Attachment 1**. As requested on the abandonment forms, copies of monitoring well construction reports are also included.

If you have any questions about this submittal or the project in general, please contact Sigma at (414) 643-4200.

Sincerely,

THE SIGMA GROUP, INC. Adam J. Rader

Adam J. Roder, P.E. Senior Engineer

Enclosures:

Attachment 1 - Monitoring Well Abandonment Forms

cc: Dr. Blake Wentz - MSOE (via email: wentz@msoe.edu)

ATTACHMENT 1 WELL ABANDONMENT FORMS

State of Wis., Dept. of Natural Resources dnr.wi.gov

Milwaukee

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Page 1 of 2

2018

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: Remediation/Redevelopment Watershed/Wastewater Drinking Water Verification Only of Fill and Seal Other: Waste Management 2. Facility / Owner Information 1. Well Location Information WI Unique Well # of Hicap # Facility Name County Computational Science Hall Removed Well MSOE Diercks MW-1 milwaukce 0 Facility ID (FID or PWS) Format Code Method Code Latitude / Longitude (see instructions) 241343410 GPS008 License/Permit/Monitoring # SCR002 DDM W OTH001 Original Well Owner Section Township Range 1/4/1/4 XE MSOE 28 22 or Gov't Lot # Present Well Owner Well Street Address MSDE 1025 N. Milwaukec Mailing Address of Present Owner Well ZIP Code Well City, Village or Town 1025 N. Broadway 53202 Milwaukee ZIP Code City of Present Owner State Subdivision Name 53202 Milwaukce WI 4. Pump, Liner, Screen, Casing & Sealing Material WI Unique Well # of Replacement Well Reason for Removal from Service X N/A Pump and piping removed? No site construction Yes No X N/A Liner(s) removed? 3. Filled & Sealed Well / Drillhole / Borehole Information Yes No X N/A Liner(s) perforated? Original Construction Date (mm/dd/yyyy) Monitoring Well Screen removed? Yes X No N/A 02/26/2018 N/A X Yes Casing left in place? Water Well If a Well Construction Report is available, ٦n/a Was casing cut off below surface? Borehole / Drillhole please attach. ∃n/a Did sealing material rise to surface? X Yes No Construction Type: X No Ŋ/Α Yes Did material settle after 24 hours? Dug Drilled Driven (Sandpoint) N/A Yes If yes, was hole retopped? Other (specify): If bentonite chips were used, were they hydrated Yes Yes Πo with water from a known safe source? Formation Type: Required Method of Placing Sealing Material X Unconsolidated Formation Bedrock Conductor Pipe-Pumped Conductor Pipe-Gravity Total Well Depth From Ground Surface (ft.) Casing Diameter (in.) Screened & Poured Other (Explain): 32.7 (Bentonite Chips) Casing Depth (ft.) Sealing Materials Lower Drillhole Diameter (in.) Concrete Neat Cement Grout Sand-Cement (Concrete) Grout Bentonite Chips **⋈** No Unknown Was well annular space grouted? For Monitoring Wells and Monitoring Well Boreholes Only: If yes, to what depth (feet)? | | Bentonite Chips Depth to Water (feet) Bentonite - Cement Grout Bentonite - Sand Slurry Granular Bentonite No. Yards. Sacks Sealant or 5. Material Used to Fill Well / Drillhole From (ft.) To (ft.) Volume (circle one) Surface 32.7 bentonite chips -gallons 6. Comments **DNR Use Only** 7. Supervision of Work Date of Filling & Sealing or Verification Date Received Noted By Name of Person or Firm Doing Filling & Sealing License # (mm/dd/yyyy) 06/01/2018The Sigma Group, Inc Telephone Number Comments Street or Route (414)1843-4200 1300 W. Canal Date Signed Signature of Person Doing Work ZIP Code State

53233

WT

Instructions

Well Filling and Sealing

Wisconsin Administrative Code (NR 811, NR 812, and NR 141 requires well owners to permanently fill and seal any unused wells/drillholes/boreholes on their property. As of June 1, 2008 water supply wells can only be filled and sealed by licensed well drillers and pump installers.

- 1. Remove any pump, pump piping, debris or other obstacles that could interfere with the sealing operation.
- 2. Except when bentonite chips are used, the sealing material must be placed with the use of a conductor (tremie) pipe to fill the entire well column to the top with required sealing material. Refer to NR 812 and NR 141 for more details on filling and sealing requirements.

General Instructions: Fill out Well/Drillhole/Borehole Filling & Sealing Report Form 3300-005 as completely as possible for each well or borehole filled and sealed. Information should be provided for every box on the form where available. Sign each form. Please note that these forms are subject to change. (Personally identifiable information on these forms is not intended to be used for any other purpose.)

Verification Only of Fill and Seal: If you are only verifying that filling and sealing has previously occurred on a well and are NOT performing any filling and sealing work on the well, check the box near the top of the form. Complete Parts 1 and 2 of the form completely and any information you can provide in Parts 3, 4 and 5. You must provide comments in Part 6 as to the method used to verify both the filling and sealing of the well. Complete Part 7, including the date of Filling and Sealing or verification. It will be implied that you did do the filling and sealing work or the verification as stated in Part 7.

Route to: Check the appropriate routing box on the top of the form to assure proper routing to the DNR program requiring this well be filled and sealed. Mail the form and any attachments to the Department of Natural Resources, PO Box 7921, Madison, WI 53707-7921.

If you do any work to fill or seal the well, you must complete this form as intended and do not check the Verification Only of Fill and Seal box.

(1) WELL LOCATION INFORMATION

WI Unique Well #: Fill in the 2 alphabetic and 3 numeric Wisconsin Unique Well Number (WUWN) of the well being filled and sealed. Check the well, sample tap in the house or the fuse box for a WUWN if one has been assigned to the well.

Hicap #: If this was a high capacity well, enter the number assigned to the well by the Department.

Well Location: Locate the well by Public Land Survey (Gov't Lot or ¼ ¼, ¼, Section, Township and Range) AND latitude and longitude coordinates, using GPS or on-line map locators.

Format Code: Check which format you are reporting in: DD = Decimal Degrees	or DDM = Degrees
Decimal Minutes ' (Place decimal point appropriately).	0. 22 209,000

Method Code: Check which method you are using to determine latitude/longitude: GPS008 = GPS Receiver; SCR002 = Online Map/ Viewer; OTH001 = Other.

(2) FACILITY / OWNER INFORMATION

If the well is located at a commercial or government facility, fill in the name of landfill, wastewater treatment facility, surface impoundment, spill or project.

Facility ID: Fill in the nine digits Facility ID (FID or PWS) assigned to the site by the Department.

License/Permit/Monitoring #: Fill in number assigned to facility by the Department. If unknown, leave blank.

Present Well Owner: Fill in the name, address, city, state and ZIP code of the present owner.

(3) FILLED & SEALED WELL/DRILLHOLE/BOREHOLE INFORMATION

Original Construction Date: Fill in the original date of construction for the well or boring in mm/dd/yyyy format. This section should include information about the original well.

Depth to Water: Enter depth to water from ground surface.

- (4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL: Check only one box where Yes, No or Not Applicable is indicated. Check all boxes which apply otherwise.
- (5) MATERIAL USED TO FILL THE WELL/DRILLHOLE: Enter the description of the filling material, the depth From and To, circle one measurement unit (Yards, Sacks or Volume), and enter the mix ratio or mud weight (in pounds per gallon).
- (6) **COMMENTS:** Describe any of the above boxes in more detail or add information as required to describe the filling and sealing procedures.
- (7) NAME OF PERSON OR FIRM DOING SEALING WORK: Enter the name (first and last) or firm name, address, and phone number of the person who supervised the work.

State of Wisconsin Department of Natural Resources Route To:	Watershed/Wa	stewater	Waste Mana	ngement	MONITORING WELL CONSTRU	J CT	ION
	Remediation/R	edevelopment 🛛	Other \square		Form 4400-113A Rev. 7-98	}	
Facility/Project Name	Local Grid Local	tion of Well		7.5	Well Name		
Diercks Computational Science Hall			ft. [J.W.	$m\omega$ -/		
Facility License, Permit or Monitoring No.	Local Grid Origi	n (estimated:	or We	ell Location	Wis. Unique Well No. DNR Well N	umb	er
	Lat.	Long		or	WA091		
Facility ID	1	ft. N,			Date Well Installed		
and an analysis of the second		of Waste/Source		II. E. S/C/N	02/26/2018		
Type of Well	Section Location	TOT Waster Bource	-	aa ⊠ E	Well Installed By: (Person's Name at	ıd Fi	rm)
2.0	NW_1/4 of _N	IW 1/4 of Sec. 28	, T	N, R. <u>22</u> □ W	Adam Woerpel		
Well Code 11/mw Distance from Waste/ Enf. Stds.	Location of well	Relative to wasterso	uice je	Gov. Lot Number	- Yuuni Wootper		
Source Apply	u 🗆 Upgradi		~		GESTRA		
11,		adient n 🗆 Not		Cap and lock?	☐ Yes	$\overline{\square}$	No
11, 1	ft. MSL	11 11		Protective cover p		722	
B. Well casing, top elevation 624.	04 ft. MSL =			a. Inside diameter:		8	in
				b. Length:	-	(ft
C. Land surface elevation	624.4 ft. MSL			c. Material:	Steel	1521	
D. Surface seal, bottom 608.9 ft. MSL	or15.5 ft.	575.71 \$45.45	10 20 21 Marsharsh		Other		
12. USCS classification of soil near screen:		TO THE OWNER OF THE PARTY OF TH	· WALLAKEAK	d. Additional prote			No
GP □ GM □ GC □ GW ☒ SV	W⊠ SP □	/ [1]	\vee	If yes, describe	flushmount		
	L 🗆 CH 🗆 📗		1 12	Surface seal:	Bentonite	\boxtimes	3 0
Bedrock □			3.	Surface sear.	Concrete		
13. Sieve analysis attached? ☐ Ye	es ⊠ No		/	1	Other		
14. Drilling method used: Rotar	ry □ 5 0		4.	Material between	well casing and protective pipe:		
Hollow Stem Aug	'				Bentonite	\boxtimes	3 0
3-7	er 🗆			2	Other		
			5	Annular space sea	a. Granular/Chipped Bentonite	\boxtimes	3 3
15. Drilling fluid used: Water □ 0 2 A	ir □01		b		and weight Bentonite-sand slurry		
Drilling Mud □ 0 3 Nor	ne ⊠99		c		nud weight Bentonite slurry		
				% Benton	=		
16. Drilling additives used? ☐ Ye	es 🛛 No		1		volume added for any of the above		
			f		·		0 1
Describe					Tremie pumped		0 2
17. Source of water (attach analysis, if required	i):				Gravity		
			6	Bentonite seal:	a. Bentonite granules		
		! ₩ ₩	/0.		3/8 in. □ 1/2 in. Bentonite chips		
624.4	or 0.0	. 🔘 🕷			Other		
E. Bentonite seal, top 624.4 ft. MSL	or	ft. 🛚 🔛	/ 7	C	l: Manufacturer, product name & mes		
F. Fine sand, top 608.9 ft. MSL	or15.5	ft.	//"	a.	#4000		
r. rine sand, top	01	/ 🛛 🖁	//		ft³		
C Filter mode ton 607.9 & MSI	or16.5		8		al: Manufacturer, product name & me	sh s	ize
G. Filter pack, top 607.9 ft. MSL	OI		/ / "	2	#5		
621.4 A MOI	or3.0			b. Volume added	- 2		
H. Screen joint, top 621.4 ft. MSL	OI	" — — — — — — — — — — — — — — — — — — —	1/ 0	Well casing:	Flush threaded PVC schedule 40	M	23
501.4 0 1/07	33.0		9.	wen casing.	Flush threaded PVC schedule 80		
I. Well bottom 591.4 ft. MSL	or <u>33.0</u>				Other		
501.0	22.5						
J. Filter pack, bottom591.9 ft. MSL	or	ft.	10.	Screen material:		* 5	1.1
	70.00			a. Screen Type:	Factory cut		
K. Borehole, bottom 591.4 ft. MSL	or <u>33.0</u>	ft	1		Continuous slot		
		\ \\//\/\	1	-	Other		
L. Borehole, diameter 9.3 in.		VIIIII				0.0	10
				c. Slot size:	7-	0.0	10_ in
M. O.D. well casing 2.25 in				d. Slotted length:			<u>.0</u> ft
			[™] 11.	. Backfill material	(below filter pack): None		
N. I.D. well casing 2.05 in					Slough Other	\boxtimes	
I hereby certify that the information on this form	m is true and corr	ect to the best of my k	nowledge.				
Signature		irm The Sigma Gro			Tel: 414	1-643	3-4200

1300 W Canal St Milwaukee, WI 53233 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.

The Sigma Group

Fax: 414-643-4210

State of Wis, Dept, of Natural Resources dnr.wi.gov

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Page 1 of 2

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Instructions

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Format Code: Check which format you are reporting in: DD = Decimal Degrees	o or DDM = Degrees
Decimal Minutes ' (Place decimal point appropriately).	or power begrees

Method Code: Check which method you are using to determine latitude/longitude: GPS008 = GPS Receiver; SCR002 = Online Map/ Viewer; OTH001 = Other.

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- (6) **COMMENTS:** Describe any of the above boxes in more detail or add information as required to describe the filling and sealing procedures.
- (7) NAME OF PERSON OR FIRM DOING SEALING WORK: Enter the name (first and last) or firm name, address, and phone number of the person who supervised the work.

State of Wisconsin Department of Natural Resources Route To:	Watershed/Ws	astewater	Waste Mana	agement []	MONITORING WELL CONSTR	UCT	ION
Route 10.		Redevelopment 🖾	Other	Бошен —	Form 4400-113A Rev. 7-9		
Facility/Project Name	Local Grid Loca	tion of Well			Well Name		
Diercks Computational Science Hall	×	$\begin{array}{c c} & \square & N. \\ & \square & S. \end{array}$ in \square (estimated:	ft. [□ E. □ W.	mw-2		
Facility License, Permit or Monitoring No.	Local Grid Orig	in (estimated: Long	☐) or We	ell Location or	Wis. Unique Well No. DNR Well N	Juml	oer
Facility ID	1	ft. N,			Date Well Installed		
3		n of Waste/Source		II, E. 3/C/N	02/26/2018		
Type of Well				22 🛛 E	Well Installed By: (Person's Name a	nd F	irm)
Well Code 11/mw	Location of Wel	NW 1/4 of Sec. 28	, 1	Gov. Lot Number	Adam Woerpel		
Distance from Waste/ Enf. Stds. Source Apply	u Upgrad			30V. Bot Ivanioe.	GTGTP 1		
Source ft. Apply	d 🗆 Downg	radient n 🗆 No			GESTRA	=	
1 1 / 1	ft. MSL			Cap and lock?	☐ Yes	S 🖂	No
B. Well casing, top elevation 625	.07 ft. MSL		2.	Protective cover page a. Inside diameter:	-	8	in.
C. Land surface elevation	625.6 ft. MSL	_		b. Length:		l	ft.
			RYEN I	c. Material:	Steel	\boxtimes	0 4
D. Surface seal, bottom 613.6 ft. MSL	or <u>12.0</u> ft.		Matheth		Other		
12. USCS classification of soil near screen:		TANK TANK	XXXXXX	d. Additional prote If yes, describe:		; L	No
	W⊠ SP □ L⊠ CH □		3.	Surface seal:	Bentonite Concrete	_	
13. Sieve analysis attached?	es ⊠ No				Other		
	ry 🗆 5 0		4	Material between	well casing and protective pipe:	Seed.	
Hollow Stem Aug	,			1714101141 000770011	Bentonite	\boxtimes	3 0
_	er 🗆 💷				Other		1000
			5.	Annular space sea	l: a. Granular/Chipped Bentonite		3 3
	ir 🗆 0 1		b		ud weight Bentonite-sand slurry		3 5
Drilling Mud □ 0 3 Nor	ne ⊠99		С		and weight Bentonite slurry		3 1
16. Drilling additives used? ☐ You	es 🖾 No		d	% Benton			5 0
10. Drining additives used:	CS ZINO		e		volume added for any of the above	_	0.1
Describe			f	: How installed:			
17. Source of water (attach analysis, if required					Tremie pumped Gravity		
ì				Bentonite seal:	a. Bentonite granules		
			/0.	b. □ 1/4 in. □ 1/2	707.		
E. Bentonite seal, top 625.6 ft. MSL	or0.0			С	Other		Table 1
E. Bentonte seat, top II. WSE	or	ft.	.7ر	Fine sand material	: Manufacturer, product name & mes	sh siz	ze
F. Fine sand, top 613.6 ft. MSL	or <u>12.0</u>	ft. 🔪 📓 🖁		a	#4000	- 2	200
	40.0	/ [24 [2]	//		ft³		
G. Filter pack, top 612.6 ft. MSL	or13.0	ft. \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	8.	Filter pack materia	al: Manufacturer, product name & me	sh si	ize
622 6 a Mai	or3.0			a	#5 ft ³		
H. Screen joint, top 622.6 ft. MSL	or	п. —		b. Volume added Well casing:	Flush threaded PVC schedule 40	121	2.3
I. Well bottom597.1_ ft. MSL	or <u>28.5</u>	n. 🔪 📗	7.	wen easing.	Flush threaded PVC schedule 80 Other		2 4
J. Filter pack, bottom597.1_ ft. MSL	or28.5	ft.	10.	Screen material:			
EDE /	20.0	7/////		a. Screen Type:	Factory cut		
K. Borehole, bottom595.6 ft. MSL	or	ft			Continuous slot		
L. Borehole diameter 9.3 in.			1	h Manufacturer	Other		
L. Borehole, diameter 9.3 in.			1	c. Slot size:	*************************************	0.0	10 in.
M. O.D. well casing 2.25 in.				d. Slotted length:		15	5.0 ft.
THE OLD I WELL SHAPE			11.	Backfill material (
N. I.D. well casing $\frac{2.05}{}$ in.					Slough Other		
I hereby certify that the information on this form	n is true and corr	ect to the best of my k	nowledge.				
Signature \(\		irm The Sigma Gro			Tel: 414	1.64:	3_4200

1300 W Canal St Milwaukee, WI 53233 Fax: 414-643-4210 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.

The Sigma Group

Tel: 414-643-4200

State of Wis., Dept. of Natural Resources dnr.wi.gov

Well / Drillhole / Borehole Filling & Sealing Report

06/01

Form 3300-005 (R 4/2015) 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: Remediation/Redevelopment Watershed/Wastewater **Drinking Water** Verification Only of Fill and Seal Other: Waste Management 2. Facility / Owner Information 1. Well Location Information Facility Name WI Unique Well # of Hicap # County Computational Science Hall Removed Well MW-MSOE Dicrcks milwaukee WIA 0 Facility ID (FID or PWS) Latitude / Longitude (see instructions) Format Code Method Code 241343410 GPS008 DD Ν License/Permit/Monitoring # SCR002 □ DDM OTH001 W Original Well Owner Township 1/4/1/4 NW NW Section Range XΕ MSOE 28 22 or Gov't Lot # Present Well Owner Well Street Address MSDE 1025 N. Milwaukec Mailing Address of Present Owner Well ZIP Code Well City, Village or Town 1025 N. Broadway Milwaukee 53202 City of Present Owner State ZIP Code Subdivision Name 53202 milwaukee WI 4. Pump, Liner, Screen, Casing & Sealing Material WI Unique Well # of Replacement Well Reason for Removal from Service X N/A Pump and piping removed? Yes No site construction X N/A Yes No Liner(s) removed? 3. Filled & Sealed Well / Drillhole / Borehole Information Liner(s) perforated? Yes No X N/A Original Construction Date (mm/dd/yyyy) Monitoring Well X No Screen removed? 02/20/2018 X Yes Water Well Casing left in place? If a Well Construction Report is available, Was casing cut off below surface? Yes N/A Borehole / Drillhole please attach. 🗸 1n/a Yes No Did sealing material rise to surface? Construction Type: X No Did material settle after 24 hours? Yes N/A Drilled Driven (Sandpoint) Dug If yes, was hole retopped? Yes Other (specify): If bentonite chips were used, were they hydrated Yes Formation Type: with water from a known safe source? Required Method of Placing Sealing Material X Unconsolidated Formation Bedrock Conductor Pipe-Pumped Conductor Pipe-Gravity Total Well Depth From Ground Surface (ft.) Casing Diameter (in.) Screened & Poured Other (Explain): 23.1 (Bentonite Chips) Sealing Materials Casing Depth (ft.) Lower Drillhole Diameter (in.) Concrete Neat Cement Grout Sand-Cement (Concrete) Grout Bentonite Chips Was well annular space grouted? **⋈** No Unknown For Monitoring Wells and Monitoring Well Boreholes Only: Depth to Water (feet) If yes, to what depth (feet)? Bentonite Chips Bentonite - Cement Grout Bentonite - Sand Slurry Granular Bentonite No. Yards, Sacks Sealant or From (ft.) 5. Material Used to Fill Well / Drillhole To (ft.) Volume (circle one) gallons 3/8" bentonite chips Surface 6. Comments **DNR Use Only** 7. Supervision of Work Date of Filling & Sealing or Verification Date Received Noted By Name of Person or Firm Doing Filling & Sealing (mm/dd/yyyy) 66/01/2018 The Sigma Group, Inc. Telephone Number Comments Street or Route (414)643-4200 1300 W. Canal Signature of Person Doing Work Date Signed ZIP Code

State

WI

53233

Milwaukec

Page 2 of 2

Instructions

Well Filling and Sealing

Wisconsin Administrative Code (NR 811, NR 812, and NR 141 requires well owners to permanently fill and seal any unused wells/drillholes/boreholes on their property. As of June 1, 2008 water supply wells can only be filled and sealed by licensed well drillers and pump installers.

- 1. Remove any pump, pump piping, debris or other obstacles that could interfere with the sealing operation.
- 2. Except when bentonite chips are used, the sealing material must be placed with the use of a conductor (tremie) pipe to fill the entire well column to the top with required sealing material. Refer to NR 812 and NR 141 for more details on filling and sealing requirements.

General Instructions: Fill out Well/Drillhole/Borehole Filling & Sealing Report Form 3300-005 as completely as possible for each well or borehole filled and sealed. Information should be provided for every box on the form where available. Sign each form. Please note that these forms are subject to change. (Personally identifiable information on these forms is not intended to be used for any other purpose.)

Verification Only of Fill and Seal: If you are only verifying that filling and sealing has previously occurred on a well and are NOT performing any filling and sealing work on the well, check the box near the top of the form. Complete Parts 1 and 2 of the form completely and any information you can provide in Parts 3, 4 and 5. You must provide comments in Part 6 as to the method used to verify both the filling and sealing of the well. Complete Part 7, including the date of Filling and Sealing or verification. It will be implied that you did do the filling and sealing work or the verification as stated in Part 7.

Route to: Check the appropriate routing box on the top of the form to assure proper routing to the DNR program requiring this well be filled and sealed. Mail the form and any attachments to the Department of Natural Resources, PO Box 7921, Madison, WI 53707-7921.

If you do any work to fill or seal the well, you must complete this form as intended and do not check the Verification Only of Fill and Seal box.

(1) WELL LOCATION INFORMATION

WI Unique Well #: Fill in the 2 alphabetic and 3 numeric Wisconsin Unique Well Number (WUWN) of the well being filled and sealed. Check the well, sample tap in the house or the fuse box for a WUWN if one has been assigned to the well.

Hicap #: If this was a high capacity well, enter the number assigned to the well by the Department.

Well Location: Locate the well by Public Land Survey (Gov't Lot or ¼ ¼, ¼, Section, Township and Range) AND latitude and longitude coordinates, using GPS or on-line map locators.

Format Code: Check which format you are reporting in: DD = Decimal Degrees	o or DDM = Degrees
Decimal Minutes ' (Place decimal point appropriately).	or bown begrees

Method Code: Check which method you are using to determine latitude/longitude: GPS008 = GPS Receiver; SCR002 = Online Map/ Viewer; OTH001 = Other.

(2) FACILITY / OWNER INFORMATION

If the well is located at a commercial or government facility, fill in the name of landfill, wastewater treatment facility, surface impoundment, spill or project.

Facility ID: Fill in the nine digits Facility ID (FID or PWS) assigned to the site by the Department.

License/Permit/Monitoring #: Fill in number assigned to facility by the Department. If unknown, leave blank.

Present Well Owner: Fill in the name, address, city, state and ZIP code of the present owner.

(3) FILLED & SEALED WELL/DRILLHOLE/BOREHOLE INFORMATION

Original Construction Date: Fill in the original date of construction for the well or boring in mm/dd/yyyy format. This section should include information about the original well.

Depth to Water: Enter depth to water from ground surface.

- (4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL: Check only one box where Yes, No or Not Applicable is indicated. Check all boxes which apply otherwise.
- (5) MATERIAL USED TO FILL THE WELL/DRILLHOLE: Enter the description of the filling material, the depth From and To, circle one measurement unit (Yards, Sacks or Volume), and enter the mix ratio or mud weight (in pounds per gallon).
- (6) **COMMENTS:** Describe any of the above boxes in more detail or add information as required to describe the filling and sealing procedures.
- (7) NAME OF PERSON OR FIRM DOING SEALING WORK: Enter the name (first and last) or firm name, address, and phone number of the person who supervised the work.

State of Wisconsin Department of Natural Resources Route To:	Watershed/Wastewater	Waste Management	MONITORING WELL CONSTRU	
	Remediation/Redevelopment	Other	Form 4400-113A Rev. 7-98	,
Facility/Project Name	Local Grid Location of Well	ПЕ	Well Name WW - 3	
Diercks Computational Science Hall	ft. S. Local Grid Origin (estimate	ft. W. d:) or Well Location	Wis. Unique Well No. DNR Well N	umber
Facility License, Permit or Monitoring No.	Lat L	ong. or	WA093	
Facility ID	St. Plane ft. N,	ft. E. S/C/N	Date Well Installed	
	Section Location of Waste/Source	54.5	02/26/2018	od Elmo
Type of Well	NW 1/4 of NW 1/4 of Sec	28 T. 7 N, R. 22 □ W	Well Installed By: (Person's Name an	ia riim)
Well Code 11/mw	Location of wen relative to wast	GOV. BOLLIUM	Adam Woerpel	
Distance from Waste/ Source ft. Enf. Stds. Apply	10	Sidegradient Not Known	GESTRA	
п. 🗀	d □ Downgradient n □ ft. MSL	1. Cap and lock?	□ Yes	⊠ No
r, i		2. Protective cover p		\sim
B. Well casing, top elevation	.96 ft. MSL	a. Inside diameter	=	<u>8</u> in.
C. Land surface elevation	623.5 ft, MSL	b. Length:		ft.
	200	c. Material:		⊠ 04
D. Surface seal, bottom 617.0 ft. MSL	01 11.	d. Additional prot	Other	□ No
12. USCS classification of soil near screen:	- C - C - C - C - C - C - C - C - C - C	If yes, describe	G 1	LI INO
	W⊠ SP□ L⊠ CH□		Bentonite	= ⊠ 30
Bedrock □		3. Surface seal:	Concrete	
13. Sieve analysis attached?	es ⊠ No		Other	
14. Drilling method used: Rota	ry □ 5 0	4. Material between	well casing and protective pipe:	
Hollow Stem Aug	er ⊠ 4 1		Bentonite	10000
Oth	er 🗆		Other	
		5. Annular space sea		
	ir □01		nud weight Bentonite-sand slurry	
Drilling Mud □ 0 3 Nor	ne ⊠99	NOCE .	nud weight Bentonite slurry	
16. Drilling additives used? □ Y	es ⊠ No	d% Benton	nite Bentonite-cement grout volume added for any of the above	□ 30
		f. How installed	·	□ 01
Describe		1. How instance	Tremie pumped	
17. Source of water (attach analysis, if required	ry 50 er 241 er 1 sir 01 ne 299 es No		• •	⊠ 08
		6. Bentonite seal:	a. Bentonite granules	□ 33
-		004	3/8 in. □ 1/2 in. Bentonite chips	
E. Bentonite seal, top623.5 ft. MSL		c	Other	
		7. Fine sand materia a b. Volume added 8. Filter pack materia	d: Manufacturer, product name & mes	h size
F. Fine sand, top 615.5 ft. MSL	or8.0 ft.	a	#4000	
21. a		b. Volume added	ft ³	
G. Filter pack, top 614.5 ft. MSL	or ft.	HHY /	al: Manufacturer, product name & me #5	SII SIZE
620.5	or3.0 ft.	a b. Volume added		
H. Screen joint, top 620.5 ft. MSL	or n.	9. Well casing:	Flush threaded PVC schedule 40	⊠ 2.3
I. Well bottom 600.0 ft, MSL	or23.5_ ft. <	J. Well classing.	Flush threaded PVC schedule 80	
1. Well bottom			Other	
J. Filter pack, bottom 600.5 ft. MSL	or23.0 ft.	10. Screen material:	PVC	
		a. Screen Type:	Factory cut	
K. Borehole, bottom 598.5 ft. MSL	or25.0 ft.		Continuous slot	
			Other .	
L. Borehole, diameter 9.3 in.		b. Manufacturer c. Slot size:		0.010 in.
225		d. Slotted length		15.0 ft.
M. O.D. well casing 2.25 in.		11. Backfill material		□ 14
N. I.D. well casing 2.05 in.		A. Duvillii illutolitii		⊠
IV. I.D. WEII CASHING				
I hereby certify that the information on this for	m is true and correct to the best of r	ny knowledge.		
Signature	Firm The Sigma	Crown	Tel: 414	4-643-4200

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.

1300 W Canal St Milwaukee, WI 53233

Fax: 414-643-4210

State of Wis., Dept. of Natural Resources dnr.wi.gov

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015) 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: Remediation/Redevelopment Watershed/Wastewater **Drinking Water** Verification Only of Fill and Seal Waste Management Other:_ 2. Facility / Owner Information 1. Well Location Information WI Unique Well # of Hicap # Facility Name County Computational Science Hall MW-4 Removed Well Diercks MSOE milwaukce 0 WH Facility ID (FID or PWS) Latitude / Longitude (see instructions) Format Code Method Code 241343410 GPS008 N icense/Permit/Monitoring # SCR002 DDM W OTH001 Original Well Owner Section Township 1/4/1/4 NW NW Range X E MSOE 28 22 or Gov't Lot# Present Well Owner Well Street Address MSDE 1025 N. Milwaukec Mailing Address of Present Owner Well ZIP Code Well City, Village or Town 1025 N. Broadway Milwaukee 53202 ZIP Code City of Present Owner State Subdivision Name WI 53202 milwaukce 4. Pump, Liner, Screen, Casing & Sealing Material WI Unique Well # of Replacement Well Reason for Removal from Service X N/A Pump and piping removed? Yes No site construction X N/A Yes No Liner(s) removed? 3. Filled & Sealed Well / Drillhole / Borehole Information Yes No X N/A Liner(s) perforated? Original Construction Date (mm/dd/yyyy) Monitoring Well Screen removed? Yes X No 02/27/2018 X Yes Water Well Casing left in place? N/A If a Well Construction Report is available, Yes Borehole / Drillhole Was casing cut off below surface? please attach. 🗸 Yes No Did sealing material rise to surface? Construction Type: X No Did material settle after 24 hours? Yes N/A Drilled Driven (Sandpoint) Dug ∃N/A Yes If yes, was hole retopped? Other (specify): If bentonite chips were used, were they hydrated Yes No Formation Type: with water from a known safe source? Required Method of Placing Sealing Material Bedrock X Unconsolidated Formation Conductor Pipe-Gravity Conductor Pipe-Pumped Total Well Depth From Ground Surface (ft.) Casing Diameter (in.) Screened & Poured 24.7 Other (Explain): (Bentonite Chips) Lower Drillhole Diameter (in.) Casing Depth (ft.) Sealing Materials Concrete **Neat Cement Grout** Sand-Cement (Concrete) Grout Bentonite Chips Was well annular space grouted? No Unknown For Monitoring Wells and Monitoring Well Boreholes Only: Depth to Water (feet) If yes, to what depth (feet)? X Bentonite Chips Bentonite - Cement Grout Granular Bentonite Bentonite - Sand Slurry No. Yards, Sacks Sealant or Mix Ratio or 5. Material Used to Fill Well / Drillhole From (ft.) To (ft.) Volume (circle one) 3/8" bentonite chips Surface aulone

7. Supervision of Work					DN	IR Use Only
Name of Person or Firm Doing Filling & Sealing The Sigma Group, Inc.	Licens			& Sealing or Verification Ole /b\ / Zb\ 8	Date Received	Noted By
Street or Route 1300 W. Canal Street			1000000000000	hone Number 4) (243 - 4200	Comments	
city Milwaukez	State W_T	ZIP Code 53233	Sig	gnature of Person Doing V	V ork	Date Signed 06/01/2018

Page 2 of 2

Instructions

Well Filling and Sealing

Wisconsin Administrative Code (NR 811, NR 812, and NR 141 requires well owners to permanently fill and seal any unused wells/drillholes/boreholes on their property. As of June 1, 2008 water supply wells can only be filled and sealed by licensed well drillers and pump installers.

- 1. Remove any pump, pump piping, debris or other obstacles that could interfere with the sealing operation.
- 2. Except when bentonite chips are used, the sealing material must be placed with the use of a conductor (tremie) pipe to fill the entire well column to the top with required sealing material. Refer to NR 812 and NR 141 for more details on filling and sealing requirements.

General Instructions: Fill out Well/Drillhole/Borehole Filling & Sealing Report Form 3300-005 as completely as possible for each well or borehole filled and sealed. Information should be provided for every box on the form where available. Sign each form. Please note that these forms are subject to change. (Personally identifiable information on these forms is not intended to be used for any other purpose.)

Verification Only of Fill and Seal: If you are only verifying that filling and sealing has previously occurred on a well and are NOT performing any filling and sealing work on the well, check the box near the top of the form. Complete Parts 1 and 2 of the form completely and any information you can provide in Parts 3, 4 and 5. You must provide comments in Part 6 as to the method used to verify both the filling and sealing of the well. Complete Part 7, including the date of Filling and Sealing or verification. It will be implied that you did do the filling and sealing work or the verification as stated in Part 7.

Route to: Check the appropriate routing box on the top of the form to assure proper routing to the DNR program requiring this well be filled and sealed. Mail the form and any attachments to the Department of Natural Resources, PO Box 7921, Madison, WI 53707-7921.

If you do any work to fill or seal the well, you must complete this form as intended and do not check the Verification Only of Fill and Seal box.

(1) WELL LOCATION INFORMATION

WI Unique Well #: Fill in the 2 alphabetic and 3 numeric Wisconsin Unique Well Number (WUWN) of the well being filled and sealed. Check the well, sample tap in the house or the fuse box for a WUWN if one has been assigned to the well.

Hicap #: If this was a high capacity well, enter the number assigned to the well by the Department.

Well Location: Locate the well by Public Land Survey (Gov't Lot or ¼ ¼, ¼, Section, Township and Range) AND latitude and longitude coordinates, using GPS or on-line map locators.

Format Code: Check which format you are reporting in: DD = Decimal Degrees	o or DDM = Degrees
Decimal Minutes ' (Place decimal point appropriately).	o. 2011. 209.000

Method Code: Check which method you are using to determine latitude/longitude: GPS008 = GPS Receiver; SCR002 = Online Map/ Viewer; OTH001 = Other.

(2) FACILITY / OWNER INFORMATION

If the well is located at a commercial or government facility, fill in the name of landfill, wastewater treatment facility, surface impoundment, spill or project.

Facility ID: Fill in the nine digits Facility ID (FID or PWS) assigned to the site by the Department.

License/Permit/Monitoring #: Fill in number assigned to facility by the Department. If unknown, leave blank.

Present Well Owner: Fill in the name, address, city, state and ZIP code of the present owner.

(3) FILLED & SEALED WELL/DRILLHOLE/BOREHOLE INFORMATION

Original Construction Date: Fill in the original date of construction for the well or boring in mm/dd/yyyy format. This section should include information about the original well.

Depth to Water: Enter depth to water from ground surface.

- (4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL: Check only one box where Yes, No or Not Applicable is indicated. Check all boxes which apply otherwise.
- (5) MATERIAL USED TO FILL THE WELL/DRILLHOLE: Enter the description of the filling material, the depth From and To, circle one measurement unit (Yards, Sacks or Volume), and enter the mix ratio or mud weight (in pounds per gallon).
- (6) **COMMENTS**: Describe any of the above boxes in more detail or add information as required to describe the filling and sealing procedures.
- (7) NAME OF PERSON OR FIRM DOING SEALING WORK: Enter the name (first and last) or firm name, address, and phone number of the person who supervised the work.

State of Wisconsin Department of Natural Resources Route To:	Watershed/Wastew Remediation/Redev		Management □	MONITORING WELL CONSTRU Form 4400-113A Rev. 7-98		ION
Facility/Project Name	Local Grid Location	of Well		Well Name		
Diercks Computational Science Hall	fl.	□ N. □ S. □ (estimated: □) or	_ft. □ E.	MW-4		
Facility License, Permit or Monitoring No.	Local Grid Origin	(estimated:) or	Well Location	Wis. Unique Well No. DNR Well N	umb	er
	Lat	Long	or	WA094		
Facility ID		ft. N,		Date Well Installed		
	Section Location of \		II, E. B/C/IV	02/27/2018		
Type of Well		1/4 of Sec, T	7 22 ⊠E.	Well Installed By: (Person's Name ar	ıd Fir	rm)
Well Code 11/mw	NW 1/4 of NW	1/4 of Sec, T ative to Waste/Source	/ N, R W	Adam Woerpel		
Distance from Waste/ Enf. Stds.	u 🗆 Upgradient	ative to waste/source s □ Sidegradient nt □ Not Known		GESTRA		_
	ft. MSL —		1. Cap and lock?	☐ Yes	\boxtimes	No
* * * *	.31 ft. MSL —		 Protective cover p Inside diameter: 		8	in.
C. Land surface elevation	522.7 ft. MSL		b. Length:	-	l	ft.
		marine and the second	c. Material:	Steel	\boxtimes	04
D. Surface seal, bottom614.7 ft. MSL	or <u>8.0</u> ft.	har than	%	Other		
12. USCS classification of soil near screen:	200	ENTERIOR STREET	d. Additional prote	ection?		No
GP □ GM □ GC □ GW⊠ SV	W□ SP ☒	/ / / / /	If yes, describe	flushmount		
	L⊠ CH□			Bentonite	\boxtimes	3 0
Bedrock □			3. Surface seal:	Concrete		0.1
13. Sieve analysis attached? ☐ Ye	es 🖾 No		v	Other		
14. Drilling method used: Rotar	y 🗆 5 0		4. Material between	well casing and protective pipe:		
Hollow Stem Aug				Bentonite	\boxtimes	3 0
_	er 🗆 📗			Other		
		₩ ₩	5. Annular space sea	a. Granular/Chipped Bentonite		3 3
15. Drilling fluid used: Water □ 0 2 A	ir 🗆 0 1			and weight Bentonite-sand slurry		
Drilling Mud □ 0.3 Nor			_	and weight Bentonite slurry		
			d% Benton			
16. Drilling additives used? ☐ Ye	s ⊠ No			volume added for any of the above		5 0
			f. How installed:	•	П	0.1
Describe			1, 11011 110111110	Tremie pumped		
17. Source of water (attach analysis, if required	.):			Gravity		
			6. Bentonite seal:	a. Bentonite granules		
:			7	3/8 in. □ 1/2 in. Bentonite chips		
E. Bentonite seal, top 622.7 ft. MSL	or0.0 ft.		С,	Other		
F. Fine sand, top 614.7 ft. MSL	or8.0 ft.		a	: Manufacturer, product name & mesi #4000	1 SIZE	
			b. Volume added			
	or9.0 ft.		8. Filter pack materia	al: Manufacturer, product name & me: #5	sh siz —	ze
H. Screen joint, top619.7 ft. MSL	or 3.0 ft. ~		b. Volume added	ft³		
			9. Well casing:	Flush threaded PVC schedule 40	\boxtimes	23
I. Well bottom 597.7 ft. MSL	or			Flush threaded PVC schedule 80 Other		2 4
J. Filter pack, bottom 598.2 ft. MSL	or24.5 ft. ~		10. Screen material:	PVC		
505 5	25.0		a. Screen Type:	Factory cut		
K. Borehole, bottom 597.7 ft. MSL	or25.0 ft.			Continuous slot Other		0 1
L. Borehole, diameter 9.3 in.			b. Manufacturer		21111111	
2. 20101010, Giantetto			c. Slot size:		0.01	0 in.
M. O.D. well casing 2.25 in.		1	d. Slotted length:			0 ft.
Wi. O.D. Well casing			11. Backfill material (below filter pack). None		
N. I.D. well casing 2.05 in			=	Slough Other		
I hereby certify that the information on this form	n is true and correct to	the hest of my knowledge	P\$			-
Signature Signature	Firm		(4)	m 4	(12	4000
(ful fr	~	The Sigma Group 1300 W Canal St Milwau	ıkee, WI 53233	Tel: 414 Fax: 414		

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.

Well / Drillhole / Borehole Filling & Sealing Report State of Wis., Dept. of Natural Resources dnr.wi.gov Form 3300-005 (R 4/2015) 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: Remediation/Redevelopment Drinking Water Watershed/Wastewater Verification Only of Fill and Seal Waste Management Other: 2. Facility / Owner Information 1. Well Location Information Facility Name WI Unique Well # of Hicap # County Computational Science Hall Removed Well MW-5 MSDE DICTORS milwaukee WH 0 Facility ID (FID or PWS) Format Code Method Code Latitude / Longitude (see instructions) 241343410 GPS008 DD License/Permit/Monitoring # SCR002 DDM **TOTH001** Original Well Owner 1/4/1/4 Section Township Range X E NW MSOE 28 22 or Gov't Lot # Present Well Owner Well Street Address MSOE 1025 N. Milwaukec 5+ Mailing Address of Present Owner Well ZIP Code Well City, Village or Town 1025 N. Broadway Milwaukee 53202 City of Present Owner State ZIP Code Subdivision Name milwaukce 53202 WI 4. Pump, Liner, Screen, Casing & Sealing Material WI Unique Well # of Replacement Well Reason for Removal from Service Pump and piping removed? Yes site construction Liner(s) removed? Yes No X N/A 3. Filled & Sealed Well / Drillhole / Borehole Information Liner(s) perforated? Yes No Original Construction Date (mm/dd/yyyy) Monitoring Well **X** N₀ N/A Screen removed? Yes 02/27/2018 Casing left in place? X Yes N/A No Water Well If a Well Construction Report is available, Yes Yes N/A Was casing cut off below surface? Borehole / Drillhole please attach. 🗸 Did sealing material rise to surface? X Yes lΝο N/A Construction Type: Yes **⊠** No N/A Did material settle after 24 hours? Drilled Driven (Sandpoint) Dug ີ N/A If yes, was hole retopped? Other (specify): If bentonite chips were used, were they hydrated Yes No □ N/A Formation Type: with water from a known safe source? Required Method of Placing Sealing Material V Unconsolidated Formation Bedrock Conductor Pipe-Gravity Conductor Pipe-Pumped Total Well Depth From Ground Surface (ft.) Casing Diameter (in.) Screened & Poured (Bentonite Chips) 29.2 Other (Explain):

Lower Drillhole Diameter (in.)	er Drillhole Diameter (in.) Casing Depth (ft.)			Sealing Materials					
		Neat Cement Grout Concrete							
			Cement (Con	crete) Grout Bentonite C	Chips				
Was well annular space grouted?	Yes No Unknown	For Monitorii	ng Wells and	Monitoring Well Boreholes Only:					
If yes, to what depth (feet)?	Depth to Water (feet)	X Benton	ite Chips	Bentonite - Cemer	nt Grout				
1	19.48	Granul	ar Bentonite	Bentonite - Sand S	Slurry				
5. Material Used to Fill Well / Drill	hole	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight				
3/8" bentonite chips		Surface	29.2	4.5 gallons					

6. Comments

7. Supervision of Work			DNR Use (Only
Name of Person or Firm Doing Filling & Sealing	License #	Date of Filling & Sealing or Verification	Date Received N	Noted By
The Sigma Group, Inc.		(mm/dd/yyyy) 06/61/2018		
Street or Route		, displication training a	Comments	
1300 W. Canal Street		(414)643-4200		
	State ZIP Code		ork Date	e Signed
Milwaukee	WI 532	33	0	6/01/2018

Page 2 of 2

Instructions

Well Filling and Sealing

Wisconsin Administrative Code (NR 811, NR 812, and NR 141 requires well owners to permanently fill and seal any unused wells/ drillholes/boreholes on their property. As of June 1, 2008 water supply wells can only be filled and sealed by licensed well drillers and pump installers.

- 1. Remove any pump, pump piping, debris or other obstacles that could interfere with the sealing operation.
- 2. Except when bentonite chips are used, the sealing material must be placed with the use of a conductor (tremie) pipe to fill the entire well column to the top with required sealing material. Refer to NR 812 and NR 141 for more details on filling and sealing requirements.

General Instructions: Fill out Well/Drillhole/Borehole Filling & Sealing Report Form 3300-005 as completely as possible for each well or borehole filled and sealed. Information should be provided for every box on the form where available. Sign each form. Please note that these forms are subject to change. (Personally identifiable information on these forms is not intended to be used for any other purpose.)

Verification Only of Fill and Seal: If you are only verifying that filling and sealing has previously occurred on a well and are NOT performing any filling and sealing work on the well, check the box near the top of the form. Complete Parts 1 and 2 of the form completely and any information you can provide in Parts 3, 4 and 5. You must provide comments in Part 6 as to the method used to verify both the filling and sealing of the well. Complete Part 7, including the date of Filling and Sealing or verification. It will be implied that you did do the filling and sealing work or the verification as stated in Part 7.

Route to: Check the appropriate routing box on the top of the form to assure proper routing to the DNR program requiring this well be filled and sealed. Mail the form and any attachments to the Department of Natural Resources, PO Box 7921, Madison, WI 53707-7921.

If you do any work to fill or seal the well, you must complete this form as intended and do not check the Verification Only of Fill and Seal box.

(1) WELL LOCATION INFORMATION

WI Unique Well #: Fill in the 2 alphabetic and 3 numeric Wisconsin Unique Well Number (WUWN) of the well being filled and sealed. Check the well, sample tap in the house or the fuse box for a WUWN if one has been assigned to the well.

Hicap #: If this was a high capacity well, enter the number assigned to the well by the Department.

Well Location: Locate the well by Public Land Survey (Gov't Lot or ¼ ¼, ¼, Section, Township and Range) AND latitude and longitude coordinates, using GPS or on-line map locators.

Format Code: Check which format you are reporting in: DD = Decimal Degrees	or DDM =	Degrees
Decimal Minutes o (Place decimal point appropriately).	_ 3, 5,51	20g.0 <u>00</u>

Method Code: Check which method you are using to determine latitude/longitude: GPS008 = GPS Receiver; SCR002 = Online Map/ Viewer; OTH001 = Other.

(2) FACILITY / OWNER INFORMATION

If the well is located at a commercial or government facility, fill in the name of landfill, wastewater treatment facility, surface impoundment, spill or project.

Facility ID: Fill in the nine digits Facility ID (FID or PWS) assigned to the site by the Department.

License/Permit/Monitoring #: Fill in number assigned to facility by the Department. If unknown, leave blank.

Present Well Owner: Fill in the name, address, city, state and ZIP code of the present owner.

(3) FILLED & SEALED WELL/DRILLHOLE/BOREHOLE INFORMATION

Original Construction Date: Fill in the original date of construction for the well or boring in mm/dd/yyyy format. This section should include information about the original well.

Depth to Water: Enter depth to water from ground surface.

- (4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL: Check only one box where Yes, No or Not Applicable is indicated. Check all boxes which apply otherwise.
- (5) MATERIAL USED TO FILL THE WELL/DRILLHOLE: Enter the description of the filling material, the depth From and To, circle one measurement unit (Yards, Sacks or Volume), and enter the mix ratio or mud weight (in pounds per gallon).
- (6) COMMENTS: Describe any of the above boxes in more detail or add information as required to describe the filling and sealing procedures.
- (7) NAME OF PERSON OR FIRM DOING SEALING WORK: Enter the name (first and last) or firm name, address, and phone number of the person who supervised the work.
 - Date of Filling & Sealing or Verification: List Month/Day/Year (mm/dd/yyyy) the well was filled & sealed or verified filled & sealed.

	State of Wisconsin Department of Natural Resources Route To:	Watershed/Wastewater Remediation/Redevelopment	Waste Mana ☑ Other □	Porriorir —	MONITORING WELL CONSTRUTE Form 4400-113A Rev. 7-9		(ON
Deck Computational Science Hall	Eggility/Praiget Name						
Care Care Creater Care	Selver interest vice to the total vice end	Docar Grid Education of West		⊒E.	MIN - 5		
Specification Specificatio	Facility License, Permit or Monitoring No.	Local Grid Origin (estima	ited: 🔲) or We	ell Location	Wis. Unique Well No. DNR Well N	umbe	er -
Specification Specificatio		Lat.	Long	or	WRUIS		
Second S	Facility ID			ft. E. S/C/N			
Distance from Water's Earl. Subs.		Section Location of Waste/Source	ce	57.0		ad Eis	
Distance from Water's Earl. Subs.	Type of Well	NW 1/4 of NW 1/4 of Sec	28 T 7 N	UR 22 □W	Well Installed By: (Person's Name at	aa rii	.m)
Distance from Waster		Location of Well Relative to Wa	ste/Source	lov. Lot Number	Adam Woerpel		
A. Protective pipe, top elevation Q 2	Source	u □ Upgradient s □] Sidegradient	20011	GESTRA		
1. 2. 2. 1. 1. 2. 2. 1. 1			1.	Cap and lock?	☐ Yes		No
3. Well casing, top elevation	1-1-7				ipe:	^	
C. Land surface selvation Surface seal, bottom 614.6 ft. MSL or 12.0 ft. MSL or 12.0 ft. MSL or 12.0 ft. MSL or 12.0 ft. MSL or 13.0 ft. M			HĽ	a. Inside diameter:		8	
D. Surface seal, bottom 6 4.6 ft, MSL or 12.0 ft	C. Land surface elevation	526.6 ft. MSL	Discourse .	_	St. of	153	
The continue seal to p	D. Surface seal, bottom 614.6 ft. MSL	or <u>12.0</u> ft.	TEXTERN More than the	c. Material:			0 4
SM SC MI MH CL SCH Sieve analysis attached? Ves No	12. USCS classification of soil near screen:	PARTIE AND THE PARTIE	A POST OFF				No
Secretary Solution				If yes, describe		1 (Suppl)	
E. Bentonite seal, top 614.6 ft. MSL or 614.6 ft. MSL or 613.6 ft. MSL or 623.6 ft. MSL or 623.6 ft. MSL or 624.6 ft. MSL or 625.6 ft. MSL or 655.6		L 🛛 CH 🗆	₩ \ \ \ 3	Surface seal:			
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		Transpa.			Tel: 41	4-643	-4200

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.