



Submitted Electronically and Uploaded to WDNR Submittal Portal

Jane K Pfeiffer
Hydrogeologist
Wisconsin Department of Natural Resources
2300 North Dr. Martin Luther King Jr Drive
Milwaukee, WI 53212-3128

Well Abandonment Documentation
Beta-Becher Acquisition Co, Llc Historic Fill Site
147 East Becher Street ("site")
Milwaukee, Wisconsin
BRRTS 02-41-589088

Dear Ms. Pfeiffer:

Ramboll US Consulting, Inc. and Ramboll Americas Engineering Services, Inc. (Ramboll), on behalf of Bear Development, LLC (Bear), completed groundwater monitoring well abandonment activities at the subject site. The wells were abandoned because of upcoming site construction activities that will occur across the site requiring the removal of the five existing groundwater monitoring wells (MW-1 through MW-5; Figure 1).

MW-1 through MW-5 were sampled in November 2021 and June 2022. No volatile organic compounds, polynuclear aromatic hydrocarbons, or Resource Conservation and Recovery Act metals were detected in groundwater above the applicable Enforcement Standards. The wells were properly abandoned before site construction begins so that they do not become damaged and potentially allow a preferential migration pathway for surface contaminants to reach the groundwater table.

The monitoring wells were abandoned according to Wisconsin Administrative Code Chapter NR 141 on May 23, 2023. Groundwater monitoring well construction forms (Form 4400-113A Rev. 6-97; Attachment 1) and abandonment forms (Form 3300-005 (R42015); Attachment 2) for the five abandoned monitoring wells are enclosed.

We trust that the information provided meets your needs. Please do not hesitate to contact either of the undersigned with questions or comments regarding this matter.

May 31, 2023

Ramboll
234 West Florida St., 5th Floor
Milwaukee, WI 53204
USA

Phone: 414-837-3607
Fax: 414-837-3608
www.ramboll.com

Ref. 1690023383



Sincerely yours,

A handwritten signature in black ink, appearing to be "Richard Mazurkiewicz".

Richard Mazurkiewicz

Managing Consultant

D 262 901 3502

rmazurkiewicz@ramboll.com

A handwritten signature in black ink, appearing to be "Daniel W. Petersen".

Daniel W. Petersen, Ph.D., P.G.

Principal

D 312.288.3883

dpetersen@ramboll.com

Figure

LEGEND

- FILER & STOWELL SITE BOUNDARY (APPROXIMATE)
- PROPERTY BOUNDARY (APPROXIMATE)
- TO BE DEMOLISHED
- TW-1 BORING AND TEMPORARY MONITORING WELL LOCATION
- MW-1 ABANDONED NR 141 GROUNDWATER MONITORING WELL
- B-1 DB-1 SOIL BORING LOCATION
- 1 CONCRETE TEST PIT LOCATION
- 14 SOIL REUSE SAMPLE LOCATION
- MW-1 SUB-SLAB SOIL VAPOR SAMPLING LOCATIONS
- CATCH BASIN
- DRAIN
- MANHOLE COVERS
- VAULT
- PIPE

New Barons Brewing
Coop, Twisted Path
Distillery, Beer City
Screen Printing)



Restaurant Depot

Boat Storage

BP AMOCO

E Becher St

Wheel & Sprocket

S Robinson Avenue

Former Industrial Property

Multi-Tenant Apartments

Railroad

S 1st Street

Staffing Partners

Former Industrial Property

E Ward Street

Kinnickinnic River

W Lincoln Avenue

MKE Urban Stables



SITE FEATURES:	
1. GARAGE (BUILDING A-1)	7. FORMER FORGE BUILDING (BUILDING C-4)
2. FOUR-STORY OFFICE BUILDING (BUILDING D-1)	8. BOAT STORAGE
3. INTEGRATED TOOL & MACHINE BUILDING (D-2)	9. FORMER BOAT MAINTENANCE AREA (BUILDING B-3)
4. SAW MILL BUILDING (C-1)	10. POWER HOUSE (BUILDING A-3 THROUGH A-6)
5. PAINT AND SAND BLAST BOOTHS	11. PATTERN STORAGE (BUILDING A-2)
6. STORAGE BUILDING (BUILDING C-3)	12. OFFICE (BUILDING B-7)
	13. TREE/LOG STORAGE AREA

SITE LAYOUT

Filer & Stowell Property
147 East Becher Street
Milwaukee, Wisconsin 53207

FIGURE 1

DRAFTED BY: RPM

DATE: 05/30/2023

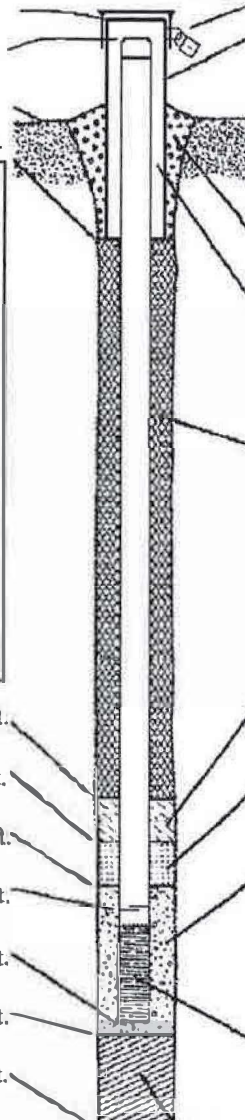
PROJECT: 1690023383

Attachment 1

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

Facility/Project Name Beta-Becher Acquisition Company, LLC		Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> E. <input type="checkbox"/> S. <input type="checkbox"/> W.		Well Name MW-1	
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. DNR Well ID No.	
Facility ID		St. Plane ft. N. ft. E. S/C/N		Date Well Installed 11/22/2021	
Type of Well Well Code 11, MW		Section Location of Waste/Source SE 1/4 of SE 1/4 of Sec. 5, T. 6 N. R. 22 <input checked="" type="checkbox"/> E <input type="checkbox"/> W		Well Installed By: Name (first, last) and Firm HORIZON CONSTRUCTION	
Distance from Waste/Source ft.		Enf. Stds. Apply <input checked="" 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	
		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:	8 in.
D. Surface seal, bottom	ft. MSL or 0.3 ft.	b. Length:	1 ft.
12. USCS classification of soil near screen: GP <input type="checkbox"/> GM <input checked="" type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/> SM <input checked="" type="checkbox"/> SC <input type="checkbox"/> ML <input checked="" type="checkbox"/> MH <input type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/> Bedrock <input type="checkbox"/>		c. Material:	Steel <input checked="" type="checkbox"/> 04 Other <input type="checkbox"/>
13. Sieve analysis performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		d. Additional protection?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, describe:
14. Drilling method used: Rotary <input type="checkbox"/> 50 Hollow Stem Auger <input checked="" type="checkbox"/> 41 Other <input type="checkbox"/>		3. Surface seal:	Bentonite <input type="checkbox"/> 30 Concrete <input checked="" type="checkbox"/> 01 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		4. Material between well casing and protective pipe:	Bentonite <input checked="" type="checkbox"/> 30 Other <input type="checkbox"/>
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		5. Annular space seal:	a. Granular/Chipped Bentonite <input checked="" 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. .25 Ft ³ volume added for any of the above f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input checked="" type="checkbox"/> 08
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 type="checkbox"/> 32 c. _____ Other <input type="checkbox"/>
E. Bentonite seal, top	ft. MSL or 0.3 ft.	7. Fine sand material: Manufacturer, product name & mesh size	a. RED FLINT 15 b. Volume added 0.34 ft ³
F. Fine sand, top	ft. MSL or 1 ft.	8. Filter pack material: Manufacturer, product name & mesh size	a. RED FLINT 40 b. Volume added 3.7 ft ³
G. Filter pack, top	ft. MSL or 2 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"/>
H. Screen joint, top	ft. MSL or 3 ft.	10. Screen material: PVC	a. Screen type: Factory cut <input type="checkbox"/> 11 Continuous slot <input checked="" type="checkbox"/> 01 Other <input type="checkbox"/>
I. Well bottom	ft. MSL or 13 ft.	b. Manufacturer _____	c. Slot size: 0.010 in. d. Slotted length: 10 ft.
J. Filter pack, bottom	ft. MSL or 13 ft.	11. Backfill material (below filter pack):	None <input type="checkbox"/> 14 BENTONITE <input checked="" type="checkbox"/>
K. Borehole, bottom	ft. MSL or 15 ft.		
L. Borehole, diameter	8.25 in.		
M. O.D. well casing	2.38 in.		
N. I.D. well casing	2.05 in.		



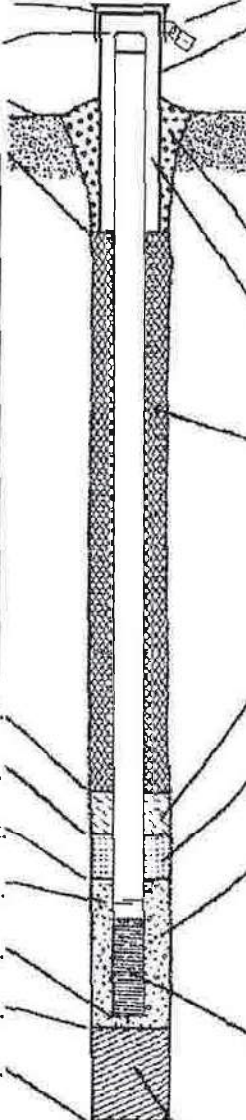
I hereby certify that the information on this form is true and correct to the best of my knowledge.
Signature: *[Handwritten Signature]* Firm: RAMBOLL US CONSULTING INC.

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.

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

Facility/Project Name Beta-Becher Acquisition Company, LLC	Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> S. <input type="checkbox"/> E. <input type="checkbox"/> W.	Well Name MW-2
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. <input type="checkbox"/> DNR Well ID No. <input type="checkbox"/>
Facility ID	Lat. _____ "Long. _____" or	Date Well Installed 11/22/2021 m m d d y y y y
Type of Well Well Code 11, MW	St. Plane _____ ft. N, _____ ft. E. S/C/N	Well Installed By: Name (first, last) and Firm HORIZON CONSTRUCTION
Distance from Waste/ Source _____ ft.	Enf. Stds. Apply <input checked="" type="checkbox"/>	Section Location of Waste/Source SE 1/4 of SE 1/4 of Sec. 5, T. 6 N, R. 22 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
	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	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: _____ in. b. Length: _____ 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 0.3 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 checked="" type="checkbox"/> SC <input type="checkbox"/> ML <input checked="" 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 checked="" 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. -25 Ft ³ volume added for any of the above f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input checked="" 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 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. RED FLINT 15 b. Volume added 0.34 ft ³
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Describe _____	8. Filter pack material: Manufacturer, product name & mesh size a. RED FLINT 40 b. Volume added 3.7 ft ³
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 0.3 ft.	10. Screen material: PVC a. Screen type: Factory cut <input type="checkbox"/> 11 Continuous slot <input checked="" type="checkbox"/> 01 Other <input type="checkbox"/>
F. Fine sand, top _____ ft. MSL or 1 ft.	b. Manufacturer _____ c. Slot size: 0.010 in. d. Slotted length: 10 ft.
G. Filter pack, top _____ ft. MSL or 2 ft.	11. Backfill material (below filter pack): None <input type="checkbox"/> 14 Other <input checked="" type="checkbox"/> BENTONITE
H. Screen joint, top _____ ft. MSL or 3 ft.	
I. Well bottom _____ ft. MSL or 13 ft.	
J. Filter pack, bottom _____ ft. MSL or 13 ft.	
K. Borehole, bottom _____ ft. MSL or 15 ft.	
L. Borehole, diameter 8.25 in.	
M. O.D. well casing 2.38 in.	
N. I.D. well casing 2.05 in.	



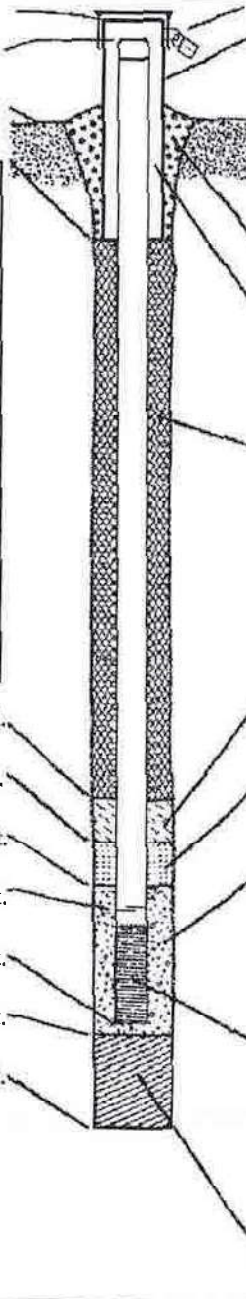
I hereby certify that the information on this form is true and correct to the best of my knowledge.
Signature: [Signature] Firm: RAMBOLL US CONSULTING INC.

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

Facility/Project Name Beta-Becher Acquisition Company, LLC	Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> S. <input type="checkbox"/> E. <input type="checkbox"/> W.	Well Name MW-3
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. DNR Well ID No.
Facility ID	St. Plane ft. N. ft. E. S/C/N	Date Well Installed 11/22/2021 m m d d y y y y
Type of Well Well Code 11, MW	Section Location of Waste/Source SE 1/4 of SE 1/4 of Sec. 5 T. 6 N. R. 22 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	Well Installed By: Name (first, last) and Firm HORIZON CONSTRUCTION
Distance from Waste/Source ft.	Enf. Stds. Apply <input checked="" 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: _____ in.
C. Land surface elevation _____ ft. MSL	b. Length: _____ ft.
D. Surface seal, bottom _____ ft. MSL or 0.3 ft.	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 checked="" type="checkbox"/> SC <input type="checkbox"/> ML <input checked="" type="checkbox"/> MH <input type="checkbox"/> CL <input 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 None <input checked="" type="checkbox"/> 99	5. Annular space seal: a. Granular/Chipped Bentonite <input checked="" 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. 0.58 Ft ³ volume added for any of the above
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input checked="" type="checkbox"/> 08
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 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. RED FLINT <input checked="" type="checkbox"/> 15 b. Volume added 0.34 ft ³
E. Bentonite seal, top _____ ft. MSL or 0.3 ft.	8. Filter pack material: Manufacturer, product name & mesh size a. RED FLINT <input checked="" type="checkbox"/> 40 b. Volume added 4.08 ft ³
F. Fine sand, top _____ ft. MSL or 2 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"/>
G. Filter pack, top _____ ft. MSL or 3 ft.	10. Screen material: PVC a. Screen type: Factory cut <input type="checkbox"/> 11 Continuous slot <input checked="" type="checkbox"/> 01 Other <input type="checkbox"/>
H. Screen joint, top _____ ft. MSL or 5 ft.	b. Manufacturer _____
I. Well bottom _____ ft. MSL or 15 ft.	c. Slot size: 0.010 in.
J. Filter pack, bottom _____ ft. MSL or 15 ft.	d. Slotted length: 10 ft.
K. Borehole, bottom _____ ft. MSL or 15 ft.	11. Backfill material (below filter pack): None <input type="checkbox"/> 14 BENTONITE <input checked="" type="checkbox"/>
L. Borehole, diameter 8.25 in.	
M. O.D. well casing 2.38 in.	
N. I.D. well casing 2.05 in.	



I hereby certify that the information on this form is true and correct to the best of my knowledge.
Signature [Signature] Firm RAMBOLL US CONSULTING 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.

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

Facility/Project Name Beta-Becher Acquisition Company, LLC	Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> S. <input type="checkbox"/> E. <input type="checkbox"/> W.	Well Name MW-4
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. DNR Well ID No.
Facility ID	Lat. " Long. " or	Date Well Installed 11/22/2021 m m d d y y y y
Type of Well Well Code 11, MW	St. Plane ft. N. ft. E. S/C/N	Well Installed By: Name (first, last) and Firm HORIZON CONSTRUCTION
Distance from Waste/Source ft.	Enf. Stds. Apply <input checked="" type="checkbox"/>	Section Location of Waste/Source SE 1/4 of SE 1/4 of Sec. 5 T. 6 N. R. 22 <input checked="" type="checkbox"/> E. <input type="checkbox"/> W.
	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	Gov. Lot Number

A. Protective pipe, top elevation _____ ft. MSL
 B. Well casing, top elevation _____ ft. MSL
 C. Land surface elevation _____ ft. MSL
 D. Surface seal, bottom _____ ft. MSL or 0.3 ft.

12. USCS classification of soil near screen:
 GP GM GC GW SW SP
 SM SC ML MH CL CH
 Bedrock

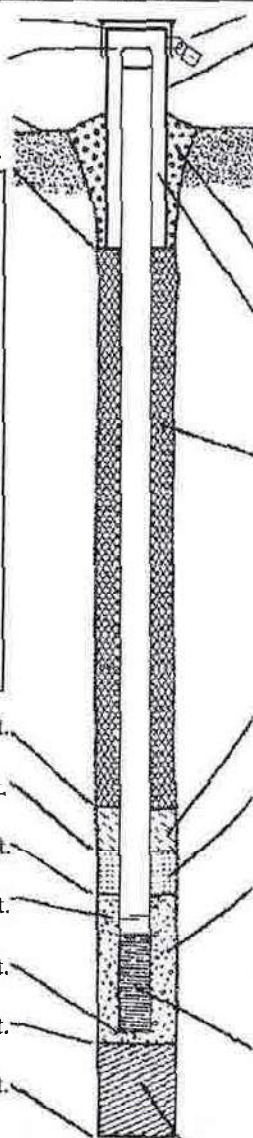
13. Sieve analysis performed? Yes No

14. Drilling method used: Rotary 50
 Hollow Stem Auger 41
 Other

15. Drilling fluid used: Water 02 Air 01
 Drilling Mud 03 None 99

16. Drilling additives used? Yes No
 Describe _____

17. Source of water (attach analysis, if required): _____



1. Cap and lock? Yes No

2. Protective cover pipe:
 a. Inside diameter: 8 in.
 b. Length: 1 ft.
 c. Material: Steel 04
 Other

d. Additional protection? Yes No
 If yes, describe: _____

3. Surface seal:
 Bentonite 30
 Concrete 01
 Other

4. Material between well casing and protective pipe:
 Bentonite 30
 Other

5. Annular space seal:
 a. Granular/Chipped Bentonite 33
 b. _____ Lbs/gal mud weight . . . Bentonite-sand slurry 35
 c. _____ Lbs/gal mud weight Bentonite slurry 31
 d. _____ % Bentonite Bentonite-cement grout 50
 e. 0.58 Ft³ volume added for any of the above
 f. How installed: Tremie 01
 Tremie pumped 02
 Gravity 08

6. Bentonite seal:
 a. Bentonite granules 33
 b. 1/4 in. 3/8 in. 1/2 in. Bentonite chips 32
 c. _____ Other

7. Fine sand material: Manufacturer, product name & mesh size
 a. RED FLINT 15
 b. Volume added 0.34 ft³

8. Filter pack material: Manufacturer, product name & mesh size
 a. RED FLINT 40
 b. Volume added 4.08 ft³

9. Well casing: Flush threaded PVC schedule 40 23
 Flush threaded PVC schedule 80 24
 Other

10. Screen material: PVC
 a. Screen type: Factory cut 11
 Continuous slot 01
 Other

b. Manufacturer _____
 c. Slot size: 0.010 in.
 d. Slotted length: 10 ft.

11. Backfill material (below filter pack): None 14
 BENTONITE

E. Bentonite seal, top _____ ft. MSL or 0.3 ft.
 F. Fine sand, top _____ ft. MSL or 2 ft.
 G. Filter pack, top _____ ft. MSL or 3 ft.
 H. Screen joint, top _____ ft. MSL or 5 ft.
 I. Well bottom _____ ft. MSL or 15 ft.
 J. Filter pack, bottom _____ ft. MSL or 15 ft.
 K. Borehole, bottom _____ ft. MSL or 15 ft.
 L. Borehole, diameter 8.25 in.
 M. O.D. well casing 2.38 in.
 N. I.D. well casing 2.05 in.

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

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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. DNR Well ID No.
Facility ID	Lat. " Long. " or	Date Well Installed 11/22/2021 m m d d y y y y
Type of Well Well Code 11 / MW	St. Plane _____ ft. N. _____ ft. E. S/C/N	Well Installed By: Name (first, last) and Firm HORIZON CONSTRUCTION
Distance from Waste/Source _____ ft.	Section Location of Waste/Source SE 1/4 of SE 1/4 of Sec. 5 T. 6 N. R. 22 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	
Enf. Stds. Apply <input checked="" 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	
	Gov. Lot Number	

- A. Protective pipe, top elevation _____ ft. MSL
- B. Well casing, top elevation _____ ft. MSL
- C. Land surface elevation _____ ft. MSL
- D. Surface seal, bottom _____ ft. MSL or 0.3 ft.

12. USCS classification of soil near screen:
 GP GM GC GW SW SP
 SM SC ML MH CL CH
 Bedrock

13. Sieve analysis performed? Yes No

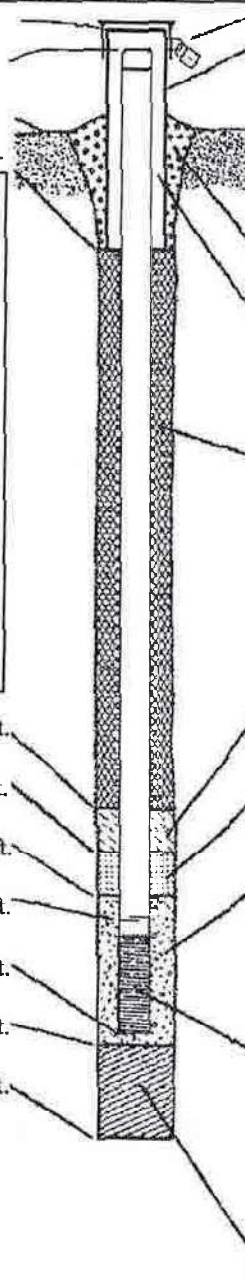
14. Drilling method used: Rotary 5 0
 Hollow Stem Auger 4 1
 Other

15. Drilling fluid used: Water 0 2 Air 0 1
 Drilling Mud 0 3 None 9 9

16. Drilling additives used? Yes No

Describe _____

17. Source of water (attach analysis, if required):



- 1. Cap and lock? Yes No
- 2. Protective cover pipe:
 - a. Inside diameter: 8 in.
 - b. Length: 1 ft.
 - c. Material: Steel 0 4
Other
 - d. Additional protection? Yes No
If yes, describe: _____
- 3. Surface seal: Bentonite 3 0
Concrete 0 1
Other
- 4. Material between well casing and protective pipe: Bentonite 3 0
Other
- 5. Annular space seal:
 - a. Granular/Chipped Bentonite 3 3
 - b. _____ Lbs/gal mud weight . . . Bentonite-sand slurry 3 5
 - c. _____ Lbs/gal mud weight Bentonite slurry 3 1
 - d. _____ % Bentonite Bentonite-cement grout 5 0
 - e. .25 Ft³ volume added for any of the above
 - f. How installed: Tremie 0 1
Tremie pumped 0 2
Gravity 0 8
- 6. Bentonite seal:
 - a. Bentonite granules 3 3
 - b. 1/4 in. 3/8 in. 1/2 in. Bentonite chips 3 2
 - c. _____ Other
- 7. Fine sand material: Manufacturer, product name & mesh size
 a. RED FLINT 15
 b. Volume added 0.34 ft³
- 8. Filter pack material: Manufacturer, product name & mesh size
 a. RED FLINT 40
 b. Volume added 4.08 ft³
- 9. Well casing: Flush threaded PVC schedule 40 2 3
 Flush threaded PVC schedule 80 2 4
 Other
- 10. Screen material: PVC
 a. Screen type: Factory cut 1 1
 Continuous slot 0 1
 Other
- b. Manufacturer _____
- c. Slot size: 0.010 in.
- d. Slotted length: 10 ft.
- 11. Backfill material (below filter pack): None 1 4
 BENTONITE

- E. Bentonite seal, top _____ ft. MSL or 0.3 ft.
- F. Fine sand, top _____ ft. MSL or 1 ft.
- G. Filter pack, top _____ ft. MSL or 2 ft.
- H. Screen joint, top _____ ft. MSL or 4 ft.
- I. Well bottom _____ ft. MSL or 14 ft.
- J. Filter pack, bottom _____ ft. MSL or 14 ft.
- K. Borehole, bottom _____ ft. MSL or 15 ft.
- L. Borehole, diameter 8.25 in.
- M. O.D. well casing 2.38 in.
- N. I.D. well casing 2.05 in.

I hereby certify that the information on this form is true and correct to the best of my knowledge.
 Signature [Signature] Firm RAMBOLL US CONSULTING 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.

Attachment 2

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

Verification Only of Fill and Seal

Route to DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

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

County Milwaukee	WI Unique Well # of Removed Well	Hicap #	Facility Name Beta-Becher Acquisition Co LLC Historic Fill
Latitude / Longitude (see instructions) 43.003925 N -87.910253 W	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input checked="" type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 1/4 SE 1/4 SE or Gov't Lot #	Section 5	Township 6 N	License/Permit/Monitoring #
Well Street Address 147 E Becher Street	Range 22	Original Well Owner Beta-Becher Acquisition Company, LLC	Present Well Owner FS Apartments, LLC
Well City, Village or Town Milwaukee	Well ZIP Code 53207	Mailing Address of Present Owner 4011 80th Street	
Subdivision Name	Lot #	City of Present Owner Kenosha	State WI
		ZIP Code 53142	

3. Filled & Sealed Well / Drillhole / Borehole Information

Monitoring Well Original Construction Date (mm/dd/yyyy)
11/22/2021

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

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

Reason for Removal from Service
Construction

WI Unique Well # of Replacement Well

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

Screened & Poured (Bentonite Chips) Other (Explain): _____

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

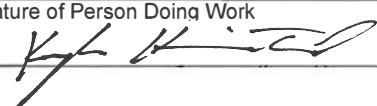
For Monitoring Wells and Monitoring Well Boreholes Only:
 Bentonite Chips Bentonite - Cement Grout
 Granular Bentonite Bentonite - Sand Slurry

5. Material Used to Fill Well / Drillhole	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
3/8" Bentonite Chips	Surface	13	0.4 sack (50# sack)	

6. Comments

MW-1

7. Supervision of Work

Name of Person or Firm Doing Filling & Sealing Kyle Heimstead	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 5/23/23	DNR Use Only	
Street or Route 234 W Florida St	Telephone Number (414) 531-0142	Comments	Date Received	Noted By
City Milwaukee	State WI	ZIP Code 53204	Signature of Person Doing Work 	Date Signed 5/23/23



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.

<input checked="" type="checkbox"/> Verification Only of Fill and Seal	Route to DNR Bureau:		
<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: _____		

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

County Milwaukee	WI Unique Well # of Removed Well _____	Hicap # _____	Facility Name Beta-Becher Acquisition Co LLC Historic Fill	
Latitude / Longitude (see instructions) 43.003746 N -87.909770 W			Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input checked="" type="checkbox"/> OTH001
¼ / ¼ SE ¼ SE or Gov't Lot #		Section 5	Township 6 N	Range 22 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well Street Address 147 E Becher Street			Original Well Owner Beta-Becher Acquisition Company, LLC	
Well City, Village or Town Milwaukee			Present Well Owner FS Apartments, LLC	
Subdivision Name			Well ZIP Code 53207	
Reason for Removal from Service Construction			Mailing Address of Present Owner 4011 80th Street	
WI Unique Well # of Replacement Well _____			City of Present Owner Kenosha	
If a Well Construction Report is available, please attach.			State WI	ZIP Code 53142

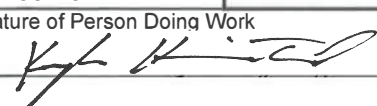
3. Filled & Sealed Well / Drillhole / Borehole Information	4. Pump, Liner, Screen, Casing & Sealing Material
--	---

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 11/22/2021	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		Liner(s) perforated? <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): _____		Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A		
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Total Well Depth From Ground Surface (ft.) 13	Casing Diameter (in.) 2	Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Lower Drillhole Diameter (in.) 9.25	Casing Depth (ft.) 3	Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet) 4.0	Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A		
If yes, to what depth (feet)?		If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A		
5. Material Used to Fill Well / Drillhole		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		
3/8" Bentonite Chips		Required Method of Placing Sealing Material <input checked="" type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____		
		Sealing Materials <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete <input type="checkbox"/> Sand-Cement (Concrete) Grout <input checked="" type="checkbox"/> Bentonite Chips		
		For Monitoring Wells and Monitoring Well Boreholes Only: <input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout <input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry		
		From (ft.) Surface	To (ft.) 13	No. Yards, Sacks Sealant or Volume (circle one) 0.4 sack (50# sack)
		Mix Ratio or Mud Weight		

5. Material Used to Fill Well / Drillhole	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
3/8" Bentonite Chips	Surface	13	0.4 sack (50# sack)	

6. Comments

MW-2

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Kyle Heimstead	License # _____	Date of Filling & Sealing or Verification (mm/dd/yyyy) 5/23/23	Date Received	Noted By
Street or Route 234 W Florida St 5th Floor		Telephone Number (414) 531-0142	Comments	
City Milwaukee	State WI	ZIP Code 53204	Signature of Person Doing Work 	
			Date Signed 5/23/23	

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

Route to DNR Bureau:

Verification Only of Fill and Seal

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

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

County Milwaukee	WI Unique Well # of Removed Well	Hicap #
Latitude / Longitude (see instructions) 43.003601 N -87.910143 W	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input checked="" type="checkbox"/> OTH001
1/4 1/4 SE 1/4 SE or Gov't Lot #	Section 5	Township 6 N
Well Street Address 147 E Becher Street	Range 22	Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well City, Village or Town Milwaukee	Well ZIP Code 53207	
Subdivision Name	Lot #	

Facility Name Beta-Becher Acquisition Co LLC Historic Fill		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner Beta-Becher Acquisition Company, LLC		
Present Well Owner FS Apartments, LLC		
Mailing Address of Present Owner 4011 80th Street		
City of Present Owner Kenosha	State WI	ZIP Code 53142

Reason for Removal from Service Construction	WI Unique Well # of Replacement Well
--	--------------------------------------

3. Filled & Sealed Well / Drillhole / Borehole Information

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 11/22/2021
<input type="checkbox"/> Water Well	
<input type="checkbox"/> 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.) 15	Casing Diameter (in.) 2
---	-----------------------------------

Lower Drillhole Diameter (in.) 9.25	Casing Depth (ft.) 3
---	--------------------------------

Was well annular space grouted? Yes No Unknown

If yes, to what depth (feet)? Depth to Water (feet)
8.0

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes	<input 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

Required Method of Placing Sealing Material

Conductor Pipe-Gravity Conductor Pipe-Pumped

Screened & Poured (Bentonite Chips) Other (Explain): _____

Sealing Materials

Neat Cement Grout Concrete

Sand-Cement (Concrete) Grout Bentonite Chips

For Monitoring Wells and Monitoring Well Boreholes Only:


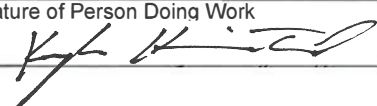
Bentonite Chips Bentonite - Cement Grout

Granular Bentonite Bentonite - Sand Slurry

5. Material Used to Fill Well / Drillhole	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
3/8" Bentonite Chips	Surface	15	0.5 sack (50# sack)	

6. Comments

MW-3

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Kyle Heimstead	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 5/23/23	Date Received	Noted By
Street or Route 234 W Florida St 5th Floor		Telephone Number (414) 531-0142	Comments	
City Milwaukee	State WI	ZIP Code 53204	Signature of Person Doing Work 	Date Signed 5/23/23

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.

<input checked="" type="checkbox"/> Verification Only of Fill and Seal	Route to DNR Bureau:	<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: _____	

1. Well Location Information	2. Facility / Owner Information
County Milwaukee	Facility Name Beta-Becher Acquisition Co LLC Historic Fill
WI Unique Well # of Removed Well _____	Facility ID (FID or PWS) _____
Hicap # _____	License/Permit/Monitoring # _____

Latitude / Longitude (see instructions) 43.003717 N -87.910390 W	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input checked="" type="checkbox"/> OTH001
1/4 1/4 SE 1/4 SE or Gov't Lot #	Section 5	Township 6 N
	Range 22	<input checked="" type="checkbox"/> E <input type="checkbox"/> W

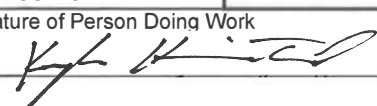
Well Street Address 147 E Becher Street	Present Well Owner FS Apartments, LLC
Well City, Village or Town Milwaukee	Mailing Address of Present Owner 4011 80th Street
Well ZIP Code 53207	City of Present Owner Kenosha
Subdivision Name _____	State WI
Lot # _____	ZIP Code 53142

Reason for Removal from Service Construction	WI Unique Well # of Replacement Well _____
--	---

3. Filled & Sealed Well / Drillhole / Borehole Information	4. Pump, Liner, Screen, Casing & Sealing Material
<input checked="" type="checkbox"/> Monitoring Well	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Water Well	Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Borehole / Drillhole	Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Original Construction Date (mm/dd/yyyy) 11/22/2021	Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
If a Well Construction Report is available, please attach. _____	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	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): _____	Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	Did material settle after 24 hours? 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.) 15	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
Casing Diameter (in.) 2	Required Method of Placing Sealing Material <input checked="" type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped
Lower Drillhole Diameter (in.) 9.25	<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____
Casing Depth (ft.) 5	Sealing Materials <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	<input type="checkbox"/> Sand-Cement (Concrete) Grout <input checked="" type="checkbox"/> Bentonite Chips
If yes, to what depth (feet)? 8.5	Depth to Water (feet) 8.5
	For Monitoring Wells and Monitoring Well Boreholes Only: <input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout
	<input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry

5. Material Used to Fill Well / Drillhole	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
3/8" Bentonite Chips	Surface	15	0.5 sack (50# sack)	

6. Comments	
MW-4	

7. Supervision of Work	DNR Use Only
Name of Person or Firm Doing Filling & Sealing Kyle Heimstead	Date Received _____
License # _____	Noted By _____
Date of Filling & Sealing or Verification (mm/dd/yyyy) 5/23/23	Comments _____
Street or Route 234 W Florida St 5th Floor	Telephone Number (414) 531-0142
City Milwaukee	Signature of Person Doing Work 
State WI	Date Signed 5/23/23
ZIP Code 53204	

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 Milwaukee		WI Unique Well # of Removed Well	Hicap #	Facility Name Beta-Becher Acquisition Co LLC Historic Fill	
Latitude / Longitude (see instructions) 43.003105 N -87.909900 W		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input checked="" type="checkbox"/> OTH001	Facility ID (FID or PWS)	
1/4 1/4 SE or Gov't Lot #	1/4 SE	Section 5	Township 6 N	Range 22	License/Permit/Monitoring #
Well Street Address 147 E Becher Street		Original Well Owner Beta-Becher Acquisition Company, LLC		Present Well Owner FS Apartments, LLC	
Well City, Village or Town Milwaukee		Well ZIP Code 53207		Mailing Address of Present Owner 4011 80th Street	
Subdivision Name		Lot #		City of Present Owner Kenosha	State WI
Reason for Removal from Service Construction		WI Unique Well # of Replacement Well		ZIP Code 53142	

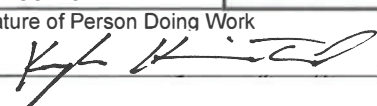
3. Filled & Sealed Well / Drillhole / Borehole Information **4. Pump, Liner, Screen, Casing & Sealing Material**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 11/22/2021	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		Liner(s) perforated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Construction Type:		Screen removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
<input checked="" type="checkbox"/> Drilled	<input type="checkbox"/> Driven (Sandpoint)	Casing left in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<input type="checkbox"/> Other (specify): _____	<input type="checkbox"/> Dug	Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Formation Type:		Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<input checked="" type="checkbox"/> Unconsolidated Formation	<input type="checkbox"/> Bedrock	Did material settle after 24 hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft.) 14	Casing Diameter (in.) 2	If yes, was hole retopped?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Lower Drillhole Diameter (in.) 9.25	Casing Depth (ft.) 4	If bentonite chips were used, were they hydrated with water from a known safe source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Was well annular space grouted?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	Required Method of Placing Sealing Material	
If yes, to what depth (feet)?	Depth to Water (feet) 6.0	<input checked="" type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	

5. Material Used to Fill Well / Drillhole	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
3/8" Bentonite Chips	Surface	14	0.45 sack (50# sack)	

6. Comments

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7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Kyle Heimstead	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 5/23/23	Date Received	Noted By
Street or Route 234 W Florida St 5th Floor	Telephone Number (414) 531-0142		Comments	
City Milwaukee	State WI	ZIP Code 53204	Signature of Person Doing Work 	Date Signed 5/23/23