

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 Douglas	WI Unique Well # of Repl. MW20	Hicap # NA	Facility Name C. Reiss Superior Dock
Latitude / Longitude (see instructions) _____ N _____ W	Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 / 1/4 or Gov't Lot #	Section 16	Township 49 N	Range 14 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
Well Street Address 50th Ave West & Lesure/3105 Winter St	Well City, Village or Town Superior	Well ZIP Code 54880	Original Well Owner Same as above
Subdivision Name	Lot #	City of Present Owner Superior	Present Well Owner Same as above
		State WI	Mailing Address of Present Owner 3105 Winter St
		ZIP Code 54880	

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

Reason for Removal from Service well destroyed	WI Unique Well # of Replacement Well Replacement not installed	<input type="checkbox"/> Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 05/02/2003	<input type="checkbox"/> Liner(s) 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.	<input type="checkbox"/> Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Borehole / Drillhole		<input type="checkbox"/> Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		<input type="checkbox"/> Casing left in place? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
<input type="checkbox"/> Other (specify): _____		<input type="checkbox"/> Was casing cut off below 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		<input type="checkbox"/> Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft.) 8'	Casing Diameter (in.) 2"	<input type="checkbox"/> Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Lower Drillhole Diameter (in.) 8"	Casing Depth (ft.)	<input type="checkbox"/> If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		<input type="checkbox"/> 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
If yes, to what depth (feet)? 2'	Depth to Water (feet) unknown	Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input checked="" type="checkbox"/> Conductor Pipe-Pumped <input type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____

5. Material Used to Fill Well / Drillhole	From (ft.)	To (ft.)	No. Yards, Sacks/ Sealant or Volume (circle one)	Mix Ratio or Mud Weight
High Solids Bentonite grout & Quik Grout	Surface	8'	1/3	.66 lbs water per lb. of Bentonite

6. Comments

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Greg Scallon	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 02/02/2024	Date Received	Noted By
Street or Route 11001 Hampshire Ave South	Telephone Number (612) 319-6108	Comments		
City Blomington	State MN	ZIP Code 55438	Signature of Person Doing Work Greg Scallon for Terry Simonson	Date Signed 5-7-24

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

Facility/Project Name C. Reiss Coal Dock		Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> E. <input type="checkbox"/> S. <input type="checkbox"/> W.		Well Name MW20	
Facility License, Permit or Monitoring No. BRRTS # 02-16-589248		Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input checked="" type="checkbox"/>		Wis. Unique Well No. DNR Well Number	
Facility ID 816130810		St. Plane _____ ft. N, _____ ft. E. S/C/N		Date Well Installed 05/02/2023	
Type of Well Well Code 71/dw		Section Location of Waste/Source NE 1/4 of SE 1/4 of Sec. 9, T. 49 N, R. 14 <input type="checkbox"/> E <input checked="" type="checkbox"/> W		Well Installed By: (Person's Name and Firm) Scott Klumb	
Distance from Waste/Source ft. _____		Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known		Gov. Lot Number _____	
Enf. Stds. Apply <input type="checkbox"/>				Soils & Engineering Services, Inc.	

- A. Protective pipe, top elevation _____ ft. MSL
- B. Well casing, top elevation 607.80 ft. MSL
- C. Land surface elevation 605.0 ft. MSL
- D. Surface seal, bottom 605.0 ft. MSL or 0.0 ft.

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

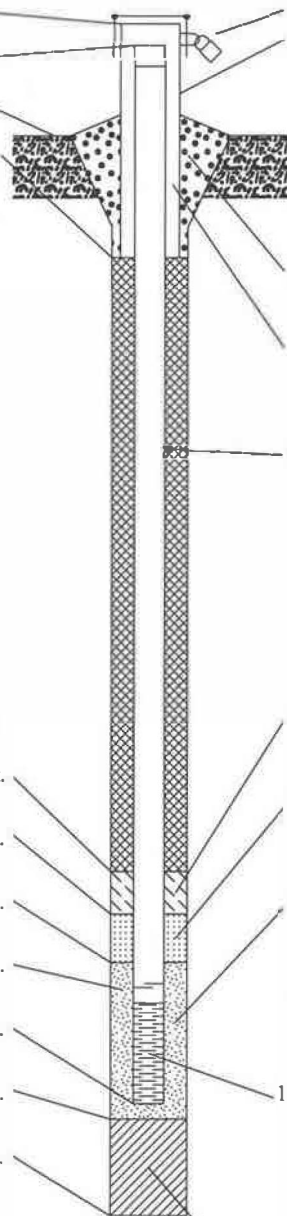
13. Sieve analysis attached? Yes No

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):



- E. Bentonite seal, top 605.0 ft. MSL or 0.0 ft.
- F. Fine sand, top 603.0 ft. MSL or 2.0 ft.
- G. Filter pack, top 602.5 ft. MSL or 2.5 ft.
- H. Screen joint, top 602.0 ft. MSL or 3.0 ft.
- I. Well bottom 597.0 ft. MSL or 8.0 ft.
- J. Filter pack, bottom 597.0 ft. MSL or 8.0 ft.
- K. Borehole, bottom 593.0 ft. MSL or 12.0 ft.
- L. Borehole, diameter 2.3 in.
- M. O.D. well casing 2.25 in.
- N. I.D. well casing 2.00 in.

- 1. Cap and lock? Yes No
- 2. Protective cover pipe:
 - a. Inside diameter: 4.0 in.
 - b. Length: 5.0 ft.
 - c. Material: Steel 0 4
Other _____
 - d. Additional protection? Yes No
If yes, describe: _____
- 3. Surface seal:
 - Bentonite 3 0
 - Concrete 0 1
 - Pure Gold Other _____
- 4. Material between well casing and protective pipe:
 - Bentonite 3 0
 - Red Flint #40 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. _____ 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. Pure Gold Other _____
- 7. Fine sand material: Manufacturer, product name & mesh size
 a. Red Flint #15
 b. Volume added 0.25 ft³
- 8. Filter pack material: Manufacturer, product name & mesh size
 a. Red Flint #40
 b. Volume added 1 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: 5.0 ft.
- 11. Backfill material (below filter pack): None 1 4
 Other _____

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

Signature Whitney Cull Firm Stantec Consulting Services Inc. Tel: _____ Fax: _____

Please complete both Form 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.

From: [Graham, Joseph R - DNR](#)
To: [Cull, Whitney](#)
Cc: [Gross, Stu](#); [Lennie, Brian](#); [Morberg, Kyle](#)
Subject: RE: MW-20 well abandonment form
Date: Thursday, May 09, 2024 7:40:00 AM

Whitney,

Received.

Thank you,

We are committed to service excellence.

Visit our survey at <http://dnr.wi.gov/customersurvey> to evaluate how I did.

Joe Graham

Cell: (715) 292-4925

joseph.graham@wisconsin.gov

From: Cull, Whitney <Whitney.Cull@stantec.com>
Sent: Wednesday, May 08, 2024 11:13 AM
To: Graham, Joseph R - DNR <Joseph.Graham@wisconsin.gov>
Cc: Gross, Stu <stu.gross@stantec.com>; Lennie, Brian <Brian.Lennie@stantec.com>; Morberg, Kyle <kyle.morberg@stantec.com>
Subject: MW-20 well abandonment form

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Do not click links or open attachments unless you recognize the sender and know the content is safe.**

Good morning Joe,

Attached is the Well Filling & Sealing Report (Form 3300-005) for MW20 on the north end of the C. Reiss Dock (FID # 816130810, BRRTS #02-16-589248). The abandonment contractor (Braun) reportedly mailed a hard copy of this form to WDNR, but we figured submitting to you via email would be the quickest way to include in the file for this site.

Thank you,

Whitney Cull

Geological Engineer in Training

Mobile: (262) 219 - 4740

We've moved, but just across the street! Please note our new address, effective 5/23/2022:

Stantec

12080 Corporate Parkway Suite 200

Mequon WI 53092-2649

The content of this email is the confidential property of Stantec and should not be copied, modified, retransmitted, or used for any purpose except with Stantec's written authorization. If you are not the intended recipient, please delete all copies and notify us immediately.

Please consider the environment before printing this email.

From: [Graham, Joseph R - DNR](#)
To: [Scallon, Greg](#)
Cc: [Morrison, David](#); [Keck, Laura](#)
Subject: RE: Sealing Report for the C Reiss Coal Dock Site (02-16-589248)
Date: Thursday, May 09, 2024 7:37:00 AM

Hello Greg,

Stantec sent me an email yesterday with a copy of the completed form attached. I believe we have everything that is needed for the well that was abandoned at the C. Reiss facility in Superior, WI.

Let me know if you need anything else.

Thank you,

We are committed to service excellence.

Visit our survey at <http://dnr.wi.gov/customersurvey> to evaluate how I did.

Joe Graham

Cell: (715) 292-4925

joseph.graham@wisconsin.gov

From: Scallon, Greg <GScallon@braunintertec.com>
Sent: Tuesday, May 07, 2024 8:01 AM
To: Graham, Joseph R - DNR <Joseph.Graham@wisconsin.gov>
Cc: Morrison, David <DMorrison@braunintertec.com>; Keck, Laura <LKeck@braunintertec.com>
Subject: Sealing Report for the C Reiss Coal Dock Site (02-16-589248)

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Joe

I'm completing a sealing report for a damaged well that was taken out of service at the above site, which I believe you're the DNR's PM for this site. We performed the actual sealing for the contractor that damaged the well. But didn't get much from them in the way of well location information, and facility/owner information. Do you have the info needed for those 2 categories on sealing report?

Greg Scallon

Braun Intertec Drilling LLC

Operations Manager

11001 Hampshire Ave South | Bloomington, MN 55438

952-995-2308 office | 612-369-6108 mobile

gscallon@braunintertec.com

