Well Construction Report
WISCONSIN UNIQUE WELL NUMBER 8BL581

Drinking Water and Groundwater - DG/5
Department of Natural Resources, Box 7921
Madison WI 53707

Form 3300-077A

Property Owner: HOWARD SCHAPER	Phone #
Mailing Address: 7455 HWY 107	
City: TOMAHAWK	State: WI / Zip Code
County: Lincoln	Co. Permit # / Notification # / Completed: 09-30-1987

1. Well Location

Town of BRADLEY	Fire # (if avail.): 7455
Street Address or Road Name and Number: HWY 107	
Subdivision Name / Lot # / Block #	

Well Constructor (Business Name): JAMES HORNUNG - HORNUNG WELL & PUMP CO.	Lic. #	Facility ID # (Public Wells)	Latitude / Longitude in Decimal Degree (DD): °N °W	Method Code
Address		Well Plan Approval #	NW SW or Govt Lot #	Section: 35 / Township: 34 N / Range: 6 E
		Approval Date (mm-dd-yyyy)		
Hicap Permanent Well #	Common Well #	Specific Capacity: 0		

2. Well Type New Well
of previous unique well # constructed in
Reason for replaced or reconstructed well ?

3. Well serves # of Home
Private,potable
Heat Exchange____# of drillholes
Hicap Well ?
Hicap Property ?
Hicap Potable ?
Construction Type

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
8	Surface	40
6	40	110

Upper Enlarged Drillhole / Lower Open Bedrock

Yes — Rotary - Air .....
Rotary - Mud Circulation .....
Rotary - Air & Foam .....
Drill-Through Casing Hammer
Reverse Rotary
Cable-tool Bit ____in. dia...
Dual Rotary .....
Temp. Outer Casing ____in. dia
Removed? ____depth ft. (If NO explain on back side)

8. Geology

Geology Codes				Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
		S		Sand	Surface	40
		C		Clay	15	34
G		Q		Gray Granite	34	110

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6.625	18.97 lbs. .280 Wall NKK Welded	Surface	40
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)

9. Static Water Level
20 ft. _____ ground surface

10. Pump Test
Pumping level 100 ft. below surface
Pumping at 3 GP for 1 Hrs.
Pumping Method ?

11. Well Is
12 in. above grade
Developed ?
Disinfected ?
Capped ?

7. Grout or Other Sealing Material
Method

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
Neat Cement	Surface	40	

12. Notified Owner of need to fill & seal ?
Filled & Sealed Well(s) as needed?

13. Constructor / Supervisory Driller	Lic #	Date Signed
Drill Rig Operator	Lic or Reg #	Date Signed

4a. Potential Contamination Sources Is the well located in floodplain ?

Comment:

Created On: 01-01-1960 Updated On: 10-15-2026 Review Status: