

|                                                                                           |  |                                                                      |  |                                                                  |  |                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                   |  |                                                                               |  |                                                        |  |            |  |                                                                                      |  |  |  |
|-------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------|--|------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------|--|--------------------------------------------------------|--|------------|--|--------------------------------------------------------------------------------------|--|--|--|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b>                    |  |                                                                      |  | <b>8BM131</b>                                                    |  | <b>Drinking Water and Groundwater - DG/5</b><br><b>Department of Natural Resources, Box 7921</b><br><b>Madison WI 53707</b>                                                                                                                                                          |  |                                                                                                                                                   |  | <small>Form 3300-077A</small>                                                 |  |                                                        |  |            |  |                                                                                      |  |  |  |
| Property Owner ANDREW DUGINSKI                                                            |  |                                                                      |  |                                                                  |  | Phone #                                                                                                                                                                                                                                                                              |  | <b>1. Well Location</b>                                                                                                                           |  |                                                                               |  | Fire # (if avail.)                                     |  |            |  |                                                                                      |  |  |  |
| Mailing Address R #1                                                                      |  |                                                                      |  |                                                                  |  | Town of SCOTT                                                                                                                                                                                                                                                                        |  |                                                                                                                                                   |  |                                                                               |  | Street Address or Road Name and Number                 |  |            |  |                                                                                      |  |  |  |
| City MERRILL                                                                              |  |                                                                      |  | State WI                                                         |  | Zip Code                                                                                                                                                                                                                                                                             |  |                                                                                                                                                   |  |                                                                               |  |                                                        |  |            |  |                                                                                      |  |  |  |
| County Lincoln                                                                            |  | Co. Permit #                                                         |  | Notification #                                                   |  | Completed 04-03-1979                                                                                                                                                                                                                                                                 |  | Subdivision Name                                                                                                                                  |  |                                                                               |  | Lot #                                                  |  | Block #    |  |                                                                                      |  |  |  |
| Well Constructor (Business Name)<br>HUBERT J. LANG - LANG WELL DRILLING CO.               |  |                                                                      |  | Lic. #                                                           |  | Facility ID # (Public Wells)                                                                                                                                                                                                                                                         |  | Latitude / Longitude in Decimal Degree (DD)<br><div style="display: flex; justify-content: space-around;"> <span>°N</span> <span>°W</span> </div> |  |                                                                               |  | Method Code                                            |  |            |  |                                                                                      |  |  |  |
| Address                                                                                   |  |                                                                      |  | Well Plan Approval #                                             |  | S      SW      Section      Township      Range<br>or Govt Lot #      30      31 N      6 E                                                                                                                                                                                          |  | <b>2. Well Type</b><br>of previous unique well #      constructed in<br>Reason for replaced or reconstructed well ?                               |  |                                                                               |  |                                                        |  |            |  |                                                                                      |  |  |  |
| Approval Date (mm-dd-yyyy)                                                                |  |                                                                      |  | Hicap Permanent Well #      Common Well #      Specific Capacity |  |                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                   |  |                                                                               |  |                                                        |  |            |  |                                                                                      |  |  |  |
| <b>3. Well serves</b> # of Farm<br>Private, potable<br>Heat Exchange ____ # of drillholes |  |                                                                      |  | Hicap Well ?<br>Hicap Property ?<br>Hicap Potable ?              |  | Construction Type                                                                                                                                                                                                                                                                    |  |                                                                                                                                                   |  |                                                                               |  |                                                        |  |            |  |                                                                                      |  |  |  |
| <b>4. Potential Contamination Sources - ON REVERSE SIDE</b>                               |  |                                                                      |  |                                                                  |  |                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                   |  |                                                                               |  |                                                        |  |            |  |                                                                                      |  |  |  |
| <b>5. Drillhole Dimensions and Construction Method</b>                                    |  |                                                                      |  |                                                                  |  |                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                   |  |                                                                               |  | <b>8. Geology</b>                                      |  |            |  |                                                                                      |  |  |  |
| Dia. (in.)                                                                                |  | From (ft.)                                                           |  | To (ft.)                                                         |  | Upper Enlarged Drillhole                                                                                                                                                                                                                                                             |  | Lower Open Bedrock                                                                                                                                |  | Geology Codes                                                                 |  | Type, Caving/Noncaving, Color, Hardness, etc...        |  | From (ft.) |  | To (ft.)                                                                             |  |  |  |
| 10                                                                                        |  | Surface                                                              |  | 10                                                               |  | Rotary - Mud Circulation .....<br>Rotary - Air .....<br>Rotary - Air & Foam .....<br>Drill-Through Casing Hammer<br>Reverse Rotary<br>Cable-tool Bit ____ in. dia...<br>Dual Rotary .....<br>Temp. Outer Casing ____ in. dia<br>Removed? ____ depth ft. (If NO explain on back side) |  | G      Q                                                                                                                                          |  | Clay                                                                          |  | Surface                                                |  | 6          |  |                                                                                      |  |  |  |
| 8                                                                                         |  | 10                                                                   |  | 40                                                               |  |                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                   |  | Grey Granite                                                                  |  | 6                                                      |  | 143        |  |                                                                                      |  |  |  |
| 6                                                                                         |  | 40                                                                   |  | 143                                                              |  |                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                   |  | 11. Well Is<br>12 in. above grade<br>Developed ?<br>Disinfected ?<br>Capped ? |  |                                                        |  |            |  |                                                                                      |  |  |  |
| 6                                                                                         |  | 40                                                                   |  | 143                                                              |  |                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                   |  |                                                                               |  |                                                        |  |            |  |                                                                                      |  |  |  |
| <b>6. Casing, Liner, Screen</b>                                                           |  |                                                                      |  |                                                                  |  |                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                   |  |                                                                               |  | <b>9. Static Water Level</b>                           |  |            |  | <b>11. Well Is</b><br>12 in. above grade<br>Developed ?<br>Disinfected ?<br>Capped ? |  |  |  |
| Dia. (in.)                                                                                |  | Material, Weight, Specification<br>Manufacturer & Method of Assembly |  |                                                                  |  | From (ft.)                                                                                                                                                                                                                                                                           |  | To (ft.)                                                                                                                                          |  | 11 ft. ____ ground surface                                                    |  |                                                        |  |            |  |                                                                                      |  |  |  |
| 6                                                                                         |  | Plain End Steel 19.87# ASTM A53 GR B USS                             |  |                                                                  |  | Surface                                                                                                                                                                                                                                                                              |  | 40                                                                                                                                                |  | Pumping level 143 ft. below surface                                           |  |                                                        |  |            |  |                                                                                      |  |  |  |
| Dia. (in.)                                                                                |  | Screen type, material & slot size                                    |  |                                                                  |  | From (ft.)                                                                                                                                                                                                                                                                           |  | To (ft.)                                                                                                                                          |  | Pumping at 0.2 GP for 2 Hrs.                                                  |  |                                                        |  |            |  |                                                                                      |  |  |  |
| 6                                                                                         |  | 6                                                                    |  |                                                                  |  | 40                                                                                                                                                                                                                                                                                   |  | Pumping Method ?                                                                                                                                  |  |                                                                               |  |                                                        |  |            |  |                                                                                      |  |  |  |
| <b>7. Grout or Other Sealing Material</b>                                                 |  |                                                                      |  |                                                                  |  |                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                   |  |                                                                               |  | <b>12. Notified Owner of need to fill &amp; seal ?</b> |  |            |  |                                                                                      |  |  |  |
| Method                                                                                    |  |                                                                      |  |                                                                  |  |                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                   |  |                                                                               |  | Filled & Sealed Well(s) as needed?                     |  |            |  |                                                                                      |  |  |  |
| Kind of Sealing Material                                                                  |  |                                                                      |  | From (ft.)                                                       |  | To (ft.)                                                                                                                                                                                                                                                                             |  | # Sacks Cement                                                                                                                                    |  |                                                                               |  |                                                        |  |            |  |                                                                                      |  |  |  |
| Drilling Mud and Cuttings                                                                 |  |                                                                      |  | Surface                                                          |  | 6                                                                                                                                                                                                                                                                                    |  | 6                                                                                                                                                 |  |                                                                               |  |                                                        |  |            |  |                                                                                      |  |  |  |
| Neat Cement                                                                               |  |                                                                      |  | 6                                                                |  | 40                                                                                                                                                                                                                                                                                   |  | 40                                                                                                                                                |  |                                                                               |  |                                                        |  |            |  |                                                                                      |  |  |  |
| <b>13. Constructor / Supervisory Driller</b>                                              |  |                                                                      |  |                                                                  |  |                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                   |  |                                                                               |  | 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: 06-30-2022

Review Status: