

|                                                                                              |  |                                                                      |                                             |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
|----------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------|---------------------------------------------|-------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------|--|------------------------------|--|--------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------|--|-----------------------------------------------------------|--|-------------|--|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b>                       |  |                                                                      |                                             | <b>8FV919</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 DON STOHLHAMMER                                                               |  |                                                                      |                                             |                                                 |  | Phone #                                                                                                                     |  | <b>1. Well Location</b>      |  |                                                                                                              |  | Fire # (if avail.)                              |  |                                                           |  |             |  |
| Mailing Address CTH C                                                                        |  |                                                                      |                                             |                                                 |  | Town of SPIRIT                                                                                                              |  |                              |  |                                                                                                              |  | Street Address or Road Name and Number<br>CTH C |  |                                                           |  |             |  |
| City OGEMA                                                                                   |  |                                                                      |                                             | State WI                                        |  | Zip Code                                                                                                                    |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| County                                                                                       |  | Co. Permit #                                                         |                                             | Notification #                                  |  | Completed<br>08-07-1973                                                                                                     |  | Subdivision Name             |  |                                                                                                              |  | Lot #                                           |  | Block #                                                   |  |             |  |
| Well Constructor (Business Name)<br>GEORGE BRUNNER                                           |  |                                                                      |                                             |                                                 |  | Lic. #                                                                                                                      |  | Facility ID # (Public Wells) |  |                                                                                                              |  | Latitude / Longitude in Decimal Degree (DD)     |  |                                                           |  | Method Code |  |
| Address                                                                                      |  |                                                                      |                                             |                                                 |  | Well Plan Approval #                                                                                                        |  |                              |  | °N                                                                                                           |  | °W                                              |  | NW SW Section Township Range<br>or Govt Lot # 19 34 N 3 E |  |             |  |
|                                                                                              |  |                                                                      |                                             |                                                 |  | Approval Date (mm-dd-yyyy)                                                                                                  |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| Hicap Permanent Well #                                                                       |  |                                                                      |                                             | Common Well #                                   |  | Specific Capacity                                                                                                           |  |                              |  | <b>2. Well Type</b><br>of previous unique well # constructed in                                              |  |                                                 |  |                                                           |  |             |  |
| <b>3. Well serves</b> # of Home                                                              |  |                                                                      |                                             |                                                 |  | Hicap Well ?                                                                                                                |  |                              |  | Reason for replaced or reconstructed well ?                                                                  |  |                                                 |  |                                                           |  |             |  |
| Private, potable                                                                             |  |                                                                      |                                             |                                                 |  | Hicap Property ?                                                                                                            |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| Heat Exchange ___ # of drillholes                                                            |  |                                                                      |                                             |                                                 |  | Hicap Potable ?                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| <b>Construction Type</b>                                                                     |  |                                                                      |                                             |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| <b>4. Potential Contamination Sources - ON REVERSE SIDE</b>                                  |  |                                                                      |                                             |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| <b>5. Drillhole Dimensions and Construction Method</b>                                       |  |                                                                      |                                             |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| Dia. (in.) From (ft.) To (ft.)                                                               |  |                                                                      | Upper Enlarged Drillhole Lower Open Bedrock |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| 10 Surface 20                                                                                |  |                                                                      | Rotary - Mud Circulation .....              |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| 6 20 47                                                                                      |  |                                                                      | Rotary - Air .....                          |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
|                                                                                              |  |                                                                      | Rotary - Air & Foam .....                   |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
|                                                                                              |  |                                                                      | Drill-Through Casing Hammer                 |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
|                                                                                              |  |                                                                      | Reverse Rotary                              |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
|                                                                                              |  |                                                                      | Yes Cable-tool Bit ___ in. dia...           |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
|                                                                                              |  |                                                                      | Dual Rotary .....                           |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
|                                                                                              |  |                                                                      | Temp. Outer Casing ___ in. dia              |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| Removed? ___ depth ft. (If NO explain on back side)                                          |  |                                                                      |                                             |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| <b>8. Geology</b>                                                                            |  |                                                                      |                                             |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| Geology Codes                                                                                |  |                                                                      |                                             | Type, Caving/Noncaving, Color, Hardness, etc... |  |                                                                                                                             |  | From (ft.)                   |  | To (ft.)                                                                                                     |  |                                                 |  |                                                           |  |             |  |
| P                                                                                            |  |                                                                      |                                             | Hardpan                                         |  |                                                                                                                             |  | Surface                      |  | 13                                                                                                           |  |                                                 |  |                                                           |  |             |  |
| S U                                                                                          |  |                                                                      |                                             | Muddy Sand                                      |  |                                                                                                                             |  | 13                           |  | 39                                                                                                           |  |                                                 |  |                                                           |  |             |  |
| E S                                                                                          |  |                                                                      |                                             | Clean Sand                                      |  |                                                                                                                             |  | 39                           |  | 44                                                                                                           |  |                                                 |  |                                                           |  |             |  |
| Y                                                                                            |  |                                                                      |                                             | Sand & Gravel                                   |  |                                                                                                                             |  | 44                           |  | 47                                                                                                           |  |                                                 |  |                                                           |  |             |  |
| <b>6. Casing, Liner, Screen</b>                                                              |  |                                                                      |                                             |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| Dia. (in.)                                                                                   |  | Material, Weight, Specification<br>Manufacturer & Method of Assembly |                                             |                                                 |  | From (ft.)                                                                                                                  |  | To (ft.)                     |  | <b>9. Static Water Level</b><br>12 ft. _____ ground surface                                                  |  |                                                 |  |                                                           |  |             |  |
| 6                                                                                            |  | New Black Steel 19.45#/ft. Threaded & Coupled                        |                                             |                                                 |  | Surface                                                                                                                     |  | 44                           |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| Dia. (in.)                                                                                   |  | Screen type, material & slot size                                    |                                             |                                                 |  | From (ft.)                                                                                                                  |  | To (ft.)                     |  | <b>10. Pump Test</b><br>Pumping level 14 ft. below surface<br>Pumping at 9 GP for 2 Hrs.<br>Pumping Method ? |  |                                                 |  |                                                           |  |             |  |
|                                                                                              |  |                                                                      |                                             |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| <b>7. Grout or Other Sealing Material</b>                                                    |  |                                                                      |                                             |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| Method                                                                                       |  |                                                                      |                                             |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| Kind of Sealing Material                                                                     |  |                                                                      |                                             | From (ft.)                                      |  | To (ft.)                                                                                                                    |  | # Sacks Cement               |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| Drilling Mud and Cuttings                                                                    |  |                                                                      |                                             | Surface                                         |  | 20                                                                                                                          |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| <b>11. Well Is</b><br>12 in. above grade<br>Developed ?<br>Disinfected ?<br>Capped ?         |  |                                                                      |                                             |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| <b>12. Notified Owner of need to fill &amp; seal ?</b><br>Filled & Sealed Well(s) as needed? |  |                                                                      |                                             |                                                 |  |                                                                                                                             |  |                              |  |                                                                                                              |  |                                                 |  |                                                           |  |             |  |
| <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: 07-28-2026

Review Status: