

|                                                                        |  |                                                                      |                                                       |                           |  |                                                                                                                             |  |                                                                       |                                   |                                                            |  |
|------------------------------------------------------------------------|--|----------------------------------------------------------------------|-------------------------------------------------------|---------------------------|--|-----------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------|-----------------------------------|------------------------------------------------------------|--|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b> |  |                                                                      |                                                       | <b>AAH800</b>             |  | <b>Drinking Water and Groundwater - DG/5</b><br><b>Department of Natural Resources, Box 7921</b><br><b>Madison WI 53707</b> |  |                                                                       |                                   | Form 3300-077A                                             |  |
| Property Owner SWANSON, JOSH                                           |  |                                                                      |                                                       | Phone #                   |  | <b>1. Well Location</b>                                                                                                     |  |                                                                       |                                   | Fire # (if avail.)                                         |  |
| Mailing Address 894 E HIGHWAY 12                                       |  |                                                                      |                                                       |                           |  | Town of HUDSON                                                                                                              |  |                                                                       |                                   | 894                                                        |  |
| City HUDSON                                                            |  |                                                                      |                                                       | State WI                  |  | Zip Code 54016                                                                                                              |  |                                                                       |                                   | Street Address or Road Name and Number<br>894 E HIGHWAY 12 |  |
| County St. Croix                                                       |  | Co. Permit #                                                         |                                                       | Notification # 9671263701 |  | Completed 12-16-2024                                                                                                        |  | Subdivision Name                                                      |                                   | Lot #<br>Block #                                           |  |
| Well Constructor (Business Name)<br>KIMMES-BAUER WELL DRILLING INC     |  |                                                                      |                                                       | Lic. # 59                 |  | Facility ID # (Public Wells)                                                                                                |  | Latitude / Longitude in Decimal Degree (DD)<br>44.9924 °N -92.6223 °W |                                   | Method Code<br>GPS008                                      |  |
| Address 22100 LILLEHEI AVE<br>HASTINGS MN 55033                        |  |                                                                      |                                                       | Well Plan Approval #      |  | NE NE Section Township Range<br>or Govt Lot # 24 29 N 19 W                                                                  |  | <b>2. Well Type</b> New Well                                          |                                   |                                                            |  |
| Hicap Permanent Well #                                                 |  |                                                                      |                                                       | Common Well #             |  | Specific Capacity<br>0.4                                                                                                    |  | of previous unique well # constructed in                              |                                   |                                                            |  |
| <b>3. Well serves</b> 1 # of HOME                                      |  |                                                                      |                                                       | Hicap Well ? No           |  | Reason for replaced or reconstructed well ?                                                                                 |  | Construction Type Drilled                                             |                                   |                                                            |  |
| Private, potable                                                       |  |                                                                      |                                                       | Hicap Property ? No       |  |                                                                                                                             |  |                                                                       |                                   |                                                            |  |
| Heat Exchange ___ # of drillholes                                      |  |                                                                      |                                                       | Hicap Potable ? No        |  |                                                                                                                             |  |                                                                       |                                   |                                                            |  |
| <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                                                                                                          |  |                                                                       | <b>8. Geology</b>                 |                                                            |  |
| 15 Surface 130                                                         |  |                                                                      | Yes Rotary - Mud Circulation ..... No                 |                           |  | T Q Y T-TAN/BROWN Q-CAVING Y-SAND & GRAVEL                                                                                  |  |                                                                       | From (ft.) To (ft.)<br>Surface 90 |                                                            |  |
| 10 130 421                                                             |  |                                                                      | No Rotary - Air ..... Yes                             |                           |  | T Q C T-TAN/BROWN Q-CAVING C-CLAY                                                                                           |  |                                                                       | 90 123                            |                                                            |  |
| 6 421 460                                                              |  |                                                                      | No Rotary - Air & Foam ..... Yes                      |                           |  | Y Q L K Y-YELLOW Q-CAVING L-LIMESTONE/DOLOMITE K-W/BROKEN ROCK                                                              |  |                                                                       | 123 136                           |                                                            |  |
|                                                                        |  |                                                                      | Yes Drill-Through Casing Hammer                       |                           |  | Y V L Y-YELLOW V-NON-CAVING L-LIMESTONE/DOLOMITE                                                                            |  |                                                                       | 136 382                           |                                                            |  |
|                                                                        |  |                                                                      | No Reverse Rotary                                     |                           |  | G V N G-GRAY V-NON-CAVING N-SANDSTONE                                                                                       |  |                                                                       | 382 460                           |                                                            |  |
|                                                                        |  |                                                                      | No Cable-tool Bit ___ in. dia... No                   |                           |  |                                                                                                                             |  |                                                                       |                                   |                                                            |  |
|                                                                        |  |                                                                      | No Dual Rotary ..... No                               |                           |  |                                                                                                                             |  |                                                                       |                                   |                                                            |  |
|                                                                        |  |                                                                      | Yes Temp. Outer Casing 10in. dia                      |                           |  |                                                                                                                             |  |                                                                       |                                   |                                                            |  |
|                                                                        |  |                                                                      | No Removed? 136depth ft. (If NO explain on back side) |                           |  |                                                                                                                             |  |                                                                       |                                   |                                                            |  |
| <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>                               |  |
| 10                                                                     |  | HUSTEEL A53B 40.48 WELDED                                            |                                                       |                           |  | 0                                                                                                                           |  | 136                                                                   |                                   | 135 ft. below ground surface                               |  |
| 6                                                                      |  | LEAVITT A53B 18.97 WELDED                                            |                                                       |                           |  | Surface                                                                                                                     |  | 421                                                                   |                                   | <b>11. Well Is</b>                                         |  |
| Dia. (in.)                                                             |  | Screen type, material & slot size                                    |                                                       |                           |  | From (ft.)                                                                                                                  |  | To (ft.)                                                              |                                   | 18 in. above grade                                         |  |
|                                                                        |  |                                                                      |                                                       |                           |  |                                                                                                                             |  |                                                                       |                                   | Developed ? Yes                                            |  |
|                                                                        |  |                                                                      |                                                       |                           |  |                                                                                                                             |  |                                                                       |                                   | Disinfected ? Yes                                          |  |
|                                                                        |  |                                                                      |                                                       |                           |  |                                                                                                                             |  |                                                                       |                                   | Capped ? Yes                                               |  |
| <b>7. Grout or Other Sealing Material</b>                              |  |                                                                      |                                                       |                           |  |                                                                                                                             |  |                                                                       |                                   |                                                            |  |
| Method TREMIE PIPE - PUMPED                                            |  |                                                                      |                                                       |                           |  |                                                                                                                             |  |                                                                       |                                   |                                                            |  |
| Kind of Sealing Material                                               |  | From (ft.)                                                           |                                                       | To (ft.)                  |  | # Sacks Cement                                                                                                              |  | <b>10. Pump Test</b>                                                  |                                   |                                                            |  |
| NEAT CEMENT GROUT                                                      |  | Surface                                                              |                                                       | 136                       |  | 4 Y                                                                                                                         |  | Pumping level 180 ft. below surface                                   |                                   |                                                            |  |
| NEAT CEMENT GROUT                                                      |  | 136                                                                  |                                                       | 421                       |  | 10 Y                                                                                                                        |  | Pumping at 20 GP M for 8 Hrs.                                         |                                   |                                                            |  |
|                                                                        |  |                                                                      |                                                       |                           |  |                                                                                                                             |  | Pumping Method ? Airlift                                              |                                   |                                                            |  |
| <b>12. Notified Owner of need to fill &amp; seal ?</b> No              |  |                                                                      |                                                       |                           |  |                                                                                                                             |  |                                                                       |                                   |                                                            |  |
| Filled & Sealed Well(s) as needed? No                                  |  |                                                                      |                                                       |                           |  |                                                                                                                             |  |                                                                       |                                   |                                                            |  |
| <b>13. Constructor / Supervisory Driller</b>                           |  |                                                                      |                                                       | Lic #                     |  | Date Signed                                                                                                                 |  |                                                                       |                                   |                                                            |  |
| AB                                                                     |  |                                                                      |                                                       | 7474                      |  | 12-16-2024                                                                                                                  |  |                                                                       |                                   |                                                            |  |
| Drill Rig Operator                                                     |  |                                                                      |                                                       | Lic or Reg #              |  | Date Signed                                                                                                                 |  |                                                                       |                                   |                                                            |  |
| CI                                                                     |  |                                                                      |                                                       | 8312                      |  | 12-16-2024                                                                                                                  |  |                                                                       |                                   |                                                            |  |

4a. Potential Contamination Sources

Is the well located in floodplain ? No

| Type                             | Qualifier | Distance |
|----------------------------------|-----------|----------|
| Septic or Holding, or POWTS Tank |           | 40       |

Comment:

| Variance ID | Variance or Exception Type | Date       | Reason |
|-------------|----------------------------|------------|--------|
| 62503       | Landfill Variance          | 10/30/2024 |        |

Created On: 02-12-2025

Updated On: 02-24-2025

Review Status: APPROVED