

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				AAN050		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A					
Property Owner TOWN OF SAND CREEK						Phone #		1. Well Location				Fire # (if avail.)			
Mailing Address P.O. BOX 38						Town of SAND CREEK									
City SAND CREEK				State WI		Zip Code 54765									
County Dunn		Co. Permit # 2507290		Notification # 10206603601		Completed 03-31-2026		Subdivision Name			Lot #		Block #		
Well Constructor (Business Name) GUSTUM, TOM				Lic. # 4813		Facility ID # (Public Wells)				Method Code SCR002					
Address GUSTUM SEPTIC SERVICE N13450 937TH ST NEW AUBURN WI 54757-9326				Well Plan Approval #		or Govt Lot #		Section 13		Township 31 N		Range 11 W			
Approval Date (mm-dd-yyyy)				2. Well Type New Well		of previous unique well # constructed in									
Hicap Permanent Well #		Common Well #		Specific Capacity		Reason for replaced or reconstructed well ? NEW WELL FOR PARK									
3. Well serves 1 # of PUBLIC PARK				Hicap Well ? No		Construction Type Driven Point									
Municipal/Community				Hicap Property ? No											
Heat Exchange ___ # of drillholes				Hicap Potable ? No											
4. Potential Contamination Sources - ON REVERSE SIDE															
5. Drillhole Dimensions and Construction Method															
Dia. (in.)		From (ft.)		To (ft.)		Upper Enlarged Drillhole				Lower Open Bedrock					
1.25		Surface		26		No Rotary - Mud Circulation				No					
1.25		26		29		No Rotary - Air				No					
						No Rotary - Air & Foam				No					
						No Drill-Through Casing Hammer									
						No Reverse Rotary									
						No Cable-tool Bit ___ in. dia...				No					
						No Dual Rotary				No					
6. Casing, Liner, Screen				No Temp. Outer Casing ___ in. dia		8. Geology									
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		9. Static Water Level 8 ft. below ground surface				11. Well Is 63 in. above grade	
1.25		GALVANIZED PIPE				Surface		26		10. Pump Test Pumping level ___ ft. below surface				Developed ? Yes	
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping at 11 GP M for 8 Hrs.				Disinfected ? Yes	
1.25		STAINLESS STEEL POINT				26		29		Pumping Method ? Test Pump				Capped ? Yes	
7. Grout or Other Sealing Material Method														12. Notified Owner of need to fill & seal ? No	
														Filled & Sealed Well(s) as needed? No	
13. Constructor / Supervisory Driller								Lic #		Date Signed					
TG								4813		04-02-2026					
Drill Rig Operator								Lic or Reg #		Date Signed					

4a. Potential Contamination SourcesIs the well located in floodplain ? Yes

Type	Qualifier	Distance
Lake, Stream, River or Pond (Including Storm Water Detention Basin)		71

Comment:

Created On: 04-02-2026

Updated On: 04-28-2026

Review Status: APPROVED