

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				AAU742		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A											
Property Owner RITCHIE, KURT						Phone #		1. Well Location				Fire # (if avail.)									
Mailing Address 201 HUNTERS CROSSINGS BLVD #202-10								Town of ADAMS				2311									
City BASTROP						State TX		Zip Code 78602				Street Address or Road Name and Number 2311 13TH LN									
County Adams		Co. Permit #		Notification # 8899332602		Completed 09-13-2022		Subdivision Name PINE OAKS SUB				Lot # 6		Block #							
Well Constructor (Business Name) FOSTER'S SEPTIC & WELL SERVICE LLC				Lic. # 163		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD) 43.9217 °N -89.832 °W				Method Code GPS008							
Address 2520 STATE RD 13 ADAMS WI 53910-9739				Well Plan Approval #		NE NW		Section 30		Township 17 N		Range 6 E									
				Approval Date (mm-dd-yyyy)		or Govt Lot #															
Hicap Permanent Well #		Common Well #		Specific Capacity 0.7		2. Well Type New Well				of previous unique well # constructed in											
3. Well serves 1 # of RV				Hicap Well ? No		Reason for replaced or reconstructed well ?															
Private, potable				Hicap Property ? No																	
Heat Exchange ___ # of drillholes				Hicap Potable ? No		Construction Type Drilled															
4. Potential Contamination Sources - ON REVERSE SIDE																					
5. Drillhole Dimensions and Construction Method														8. Geology							
Dia. (in.)		From (ft.)		To (ft.)		Upper Enlarged Drillhole				Lower Open Bedrock		Geology Codes		Type, Caving/Noncaving, Color, Hardness, etc...		From (ft.)		To (ft.)			
8		Surface		58		<u>Yes</u> Rotary - Mud Circulation <u>No</u> <u>No</u> Rotary - Air <u>No</u> <u>No</u> Rotary - Air & Foam <u>No</u> <u>No</u> Drill-Through Casing Hammer <u>No</u> Reverse Rotary <u>No</u> Cable-tool Bit ___ in. dia... <u>No</u> <u>No</u> Dual Rotary <u>No</u> <u>No</u> Temp. Outer Casing ___ in. dia <u>No</u> Removed? ___ depth ft. (If NO explain on back side)						S		S-SAND		Surface		30			
												C		C-CLAY		30		52			
												S		S-SAND		52		58			
6. Casing, Liner, Screen														9. Static Water Level				11. Well Is			
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		22 ft. below ground surface				15 in. above grade							
4		CRESTLINE ASTM F-480 200 PSI SDR21				Surface		55		10. Pump Test				Developed ? Yes							
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping level 45 ft. below surface				Disinfected ? Yes							
4		ALLOY MACHINE SS 15 SLOT				55		58		Pumping at 15 GP M for 1 Hrs.				Capped ? Yes							
										Pumping Method ? Airlift											
7. Grout or Other Sealing Material														12. Notified Owner of need to fill & seal ?				No			
Method		TREMIE PIPE - PUMPED												Filled & Sealed Well(s) as needed?				No			
Kind of Sealing Material		From (ft.)		To (ft.)		# Sacks Cement															
HIGH SOLIDS BENT		Surface		49		6 S															
RED FLINT # 40		49		58		4 S															
13. Constructor / Supervisory Driller														Lic #		Date Signed					
RR														7202		09-13-2022					
Drill Rig Operator														Lic or Reg #		Date Signed					
ZF														8506		09-13-2022					

4a. Potential Contamination SourcesIs the well located in floodplain ? No

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		55	Septic or Holding, or POWTS Tank		30

Comment:

Created On: 09-14-2022

Updated On: 09-23-2022

Review Status: APPROVED