

|                                                                                                    |  |                                                                      |  |                            |  |                                                                                                                             |  |                                                                                                              |  |                                                                                                                           |       |                                                          |         |                                                           |  |          |  |                    |  |             |  |  |  |
|----------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------|--|----------------------------|--|-----------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------------|---------|-----------------------------------------------------------|--|----------|--|--------------------|--|-------------|--|--|--|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b>                             |  |                                                                      |  | <b>ABP595</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 RMS GROUP - CHRIS CYBUL                                                             |  |                                                                      |  |                            |  | Phone # (224)234-9744                                                                                                       |  | <b>1. Well Location</b>                                                                                      |  |                                                                                                                           |       | Fire # (if avail.)                                       |         |                                                           |  |          |  |                    |  |             |  |  |  |
| Mailing Address PO BOX 172                                                                         |  |                                                                      |  |                            |  | Village of SALEM LAKES                                                                                                      |  |                                                                                                              |  |                                                                                                                           |       |                                                          |         |                                                           |  |          |  |                    |  |             |  |  |  |
| City ANTIOCH                                                                                       |  |                                                                      |  |                            |  | State IL                                                                                                                    |  | Zip Code 60002                                                                                               |  |                                                                                                                           |       | Street Address or Road Name and Number<br>9906 271ST AVE |         |                                                           |  |          |  |                    |  |             |  |  |  |
| County Kenosha                                                                                     |  | Co. Permit #                                                         |  | Notification # 9153749202  |  | Completed 07-10-2023                                                                                                        |  | Subdivision Name                                                                                             |  |                                                                                                                           | Lot # |                                                          | Block # |                                                           |  |          |  |                    |  |             |  |  |  |
| Well Constructor (Business Name)<br>BEACH PUMP & WELL SERVICE INC                                  |  |                                                                      |  | Lic. # 6124                |  | Facility ID # (Public Wells)                                                                                                |  | Latitude / Longitude in Decimal Degree (DD)<br>42.52907 °N -88.13707 °W                                      |  |                                                                                                                           |       | Method Code<br>SCR002                                    |         |                                                           |  |          |  |                    |  |             |  |  |  |
| Address 10453 W BOYCE LN<br>BEACH PARK IL 60087                                                    |  |                                                                      |  | Well Plan Approval #       |  | NW SE                                                                                                                       |  | Section 21                                                                                                   |  | Township 1 N                                                                                                              |       | Range 20 E                                               |         |                                                           |  |          |  |                    |  |             |  |  |  |
|                                                                                                    |  |                                                                      |  | Approval Date (mm-dd-yyyy) |  | or Govt Lot #                                                                                                               |  |                                                                                                              |  |                                                                                                                           |       |                                                          |         |                                                           |  |          |  |                    |  |             |  |  |  |
| Hicap Permanent Well #                                                                             |  | Common Well #                                                        |  | Specific Capacity<br>6.7   |  | <b>2. Well Type</b> New Well                                                                                                |  |                                                                                                              |  |                                                                                                                           |       |                                                          |         |                                                           |  |          |  |                    |  |             |  |  |  |
| <b>3. Well serves</b> 1 # of HOME<br><br>Private, potable<br><br>Heat Exchange ___ # of drillholes |  |                                                                      |  |                            |  | Hicap Well ? No                                                                                                             |  | of previous unique well # constructed in 2023<br><br>Reason for replaced or reconstructed well ?<br>NEW HOME |  |                                                                                                                           |       |                                                          |         |                                                           |  |          |  |                    |  |             |  |  |  |
|                                                                                                    |  |                                                                      |  |                            |  | Hicap Property ? No                                                                                                         |  |                                                                                                              |  |                                                                                                                           |       |                                                          |         |                                                           |  |          |  |                    |  |             |  |  |  |
|                                                                                                    |  |                                                                      |  |                            |  | Hicap Potable ? No                                                                                                          |  | Construction Type Drilled                                                                                    |  |                                                                                                                           |       |                                                          |         |                                                           |  |          |  |                    |  |             |  |  |  |
|                                                                                                    |  |                                                                      |  |                            |  |                                                                                                                             |  |                                                                                                              |  |                                                                                                                           |       |                                                          |         |                                                           |  |          |  |                    |  |             |  |  |  |
| <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                                                                                           |  | Geology Codes                                                                                                             |       | Type, Caving/Noncaving, Color, Hardness, etc...          |         | From (ft.)                                                |  | To (ft.) |  |                    |  |             |  |  |  |
| 10                                                                                                 |  | Surface                                                              |  | 9                          |  | No Rotary - Mud Circulation .....                                                                                           |  | No                                                                                                           |  | Y C                                                                                                                       |       | Y-YELLOW C-CLAY                                          |         | Surface                                                   |  | 19       |  |                    |  |             |  |  |  |
| 5                                                                                                  |  | 9                                                                    |  | 89                         |  | No Rotary - Air .....                                                                                                       |  | No                                                                                                           |  | G C G                                                                                                                     |       | G-GRAY C-CLAY G-W/GRAVEL/STONES                          |         | 19                                                        |  | 41       |  |                    |  |             |  |  |  |
|                                                                                                    |  |                                                                      |  |                            |  | No Rotary - Air & Foam .....                                                                                                |  | No                                                                                                           |  | G C                                                                                                                       |       | G-GRAY C-CLAY                                            |         | 41                                                        |  | 80       |  |                    |  |             |  |  |  |
|                                                                                                    |  |                                                                      |  |                            |  | No Drill-Through Casing Hammer                                                                                              |  |                                                                                                              |  |                                                                                                                           |       | S-SAND                                                   |         | 80                                                        |  | 89       |  |                    |  |             |  |  |  |
|                                                                                                    |  |                                                                      |  |                            |  | No Reverse Rotary                                                                                                           |  |                                                                                                              |  |                                                                                                                           |       |                                                          |         |                                                           |  |          |  |                    |  |             |  |  |  |
|                                                                                                    |  |                                                                      |  |                            |  | Yes Cable-tool Bit 5in. dia...                                                                                              |  | No                                                                                                           |  |                                                                                                                           |       |                                                          |         |                                                           |  |          |  |                    |  |             |  |  |  |
|                                                                                                    |  |                                                                      |  |                            |  | No Dual Rotary .....                                                                                                        |  | No                                                                                                           |  |                                                                                                                           |       |                                                          |         |                                                           |  |          |  |                    |  |             |  |  |  |
|                                                                                                    |  |                                                                      |  |                            |  | No Temp. Outer Casing ___ in. dia                                                                                           |  |                                                                                                              |  |                                                                                                                           |       |                                                          |         |                                                           |  |          |  |                    |  |             |  |  |  |
|                                                                                                    |  |                                                                      |  |                            |  | No Removed? ___ depth ft. (If NO explain on back side)                                                                      |  |                                                                                                              |  |                                                                                                                           |       |                                                          |         |                                                           |  |          |  |                    |  |             |  |  |  |
| <b>6. Casing, Liner, Screen</b>                                                                    |  |                                                                      |  |                            |  |                                                                                                                             |  |                                                                                                              |  |                                                                                                                           |       |                                                          |         | <b>9. Static Water Level</b>                              |  |          |  | <b>11. Well Is</b> |  |             |  |  |  |
| Dia. (in.)                                                                                         |  | Material, Weight, Specification<br>Manufacturer & Method of Assembly |  |                            |  | From (ft.)                                                                                                                  |  | To (ft.)                                                                                                     |  | 12 ft. below ground surface                                                                                               |       |                                                          |         | 15 in. above grade                                        |  |          |  |                    |  |             |  |  |  |
| 5                                                                                                  |  | ASTM A-53 BT/C WHEATLAND - COUPLING ASSEMBLY                         |  |                            |  | Surface                                                                                                                     |  | 86                                                                                                           |  | <b>10. Pump Test</b><br>Pumping level 15 ft. below surface<br>Pumping at 20 GP M for 3 Hrs.<br>Pumping Method ? Test Pump |       |                                                          |         | Developed ? Yes<br>Disinfected ? Yes<br>Capped ? Yes      |  |          |  |                    |  |             |  |  |  |
| Dia. (in.)                                                                                         |  | Screen type, material & slot size                                    |  |                            |  | From (ft.)                                                                                                                  |  | To (ft.)                                                                                                     |  |                                                                                                                           |       |                                                          |         |                                                           |  |          |  |                    |  |             |  |  |  |
| 5                                                                                                  |  | 5" TELE STAINLESS SLOT # 10, SAND                                    |  |                            |  | 86                                                                                                                          |  | 89                                                                                                           |  |                                                                                                                           |       |                                                          |         |                                                           |  |          |  |                    |  |             |  |  |  |
| <b>7. Grout or Other Sealing Material</b><br>Method GROUT DISPLACEMENT (PLUG)                      |  |                                                                      |  |                            |  |                                                                                                                             |  |                                                                                                              |  |                                                                                                                           |       |                                                          |         | <b>12. Notified Owner of need to fill &amp; seal ?</b> No |  |          |  |                    |  |             |  |  |  |
| Kind of Sealing Material                                                                           |  |                                                                      |  | From (ft.)                 |  | To (ft.)                                                                                                                    |  | # Sacks Cement                                                                                               |  | Filled & Sealed Well(s) as needed? No                                                                                     |       |                                                          |         |                                                           |  |          |  |                    |  |             |  |  |  |
| GRANULAR BENTONITE                                                                                 |  |                                                                      |  | Surface                    |  | 9                                                                                                                           |  | 3 S                                                                                                          |  |                                                                                                                           |       |                                                          |         |                                                           |  |          |  |                    |  |             |  |  |  |
|                                                                                                    |  |                                                                      |  |                            |  |                                                                                                                             |  |                                                                                                              |  |                                                                                                                           |       |                                                          |         | <b>13. Constructor / Supervisory Driller</b>              |  |          |  | Lic #              |  | Date Signed |  |  |  |
|                                                                                                    |  |                                                                      |  |                            |  |                                                                                                                             |  |                                                                                                              |  |                                                                                                                           |       |                                                          |         | KB                                                        |  |          |  | 6123               |  | 10-18-2023  |  |  |  |
|                                                                                                    |  |                                                                      |  |                            |  |                                                                                                                             |  |                                                                                                              |  |                                                                                                                           |       |                                                          |         | Drill Rig Operator                                        |  |          |  | Lic or Reg #       |  | Date Signed |  |  |  |
|                                                                                                    |  |                                                                      |  |                            |  |                                                                                                                             |  |                                                                                                              |  |                                                                                                                           |       |                                                          |         | KB                                                        |  |          |  | 6123               |  | 10-18-2023  |  |  |  |

**4a. Potential Contamination Sources**

Is the well located in floodplain ? No

Comment:

Created On: 10-18-2023

Updated On: 11-27-2023

Review Status: APPROVED