

|                                                                        |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
|------------------------------------------------------------------------|--|----------------------------------------------------------------------|------------------------------------------------------|-------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------|--|------------------------------|--|-------------------------------------------------------------------------|--|------------------------------------------------------|--|-----------------------|--|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b> |  |                                                                      |                                                      | <b>ACA256</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 MARCH, JAMES                                            |  |                                                                      |                                                      |                                                 |  | Phone #                                                                                                                     |  | <b>1. Well Location</b>      |  |                                                                         |  | Fire # (if avail.)                                   |  |                       |  |
| Mailing Address N1517 PARCHEM RD                                       |  |                                                                      |                                                      |                                                 |  | Town of KILDARE                                                                                                             |  |                              |  |                                                                         |  | N1517                                                |  |                       |  |
| City LYNDONSTATION                                                     |  |                                                                      |                                                      |                                                 |  | State WI                                                                                                                    |  | Zip Code 53944               |  |                                                                         |  | Street Address or Road Name and Number<br>PARCHEM RD |  |                       |  |
| County Juneau                                                          |  | Co. Permit #                                                         |                                                      | Notification # 9565606701                       |  | Completed 10-18-2024                                                                                                        |  | Subdivision Name             |  |                                                                         |  | Lot #<br>Block #                                     |  |                       |  |
| Well Constructor (Business Name)<br>SMITH, DAVID WILLIAM               |  |                                                                      |                                                      | Lic. # 38                                       |  | Facility ID # (Public Wells)                                                                                                |  |                              |  | Latitude / Longitude in Decimal Degree (DD)<br>43.69141 °N -89.89619 °W |  |                                                      |  | Method Code<br>GPS008 |  |
| Address D W SMITH WELL DRILLING E10704B<br>HWY 136<br>BARABOO WI 53913 |  |                                                                      |                                                      | Well Plan Approval #                            |  | NW SW Section Township Range<br>or Govt Lot # 15 14 N 5 E                                                                   |  | <b>2. Well Type</b> New Well |  |                                                                         |  | of previous unique well # constructed in             |  |                       |  |
| Hicap Permanent Well #                                                 |  | Common Well #                                                        |                                                      | Specific Capacity<br>0                          |  | Reason for replaced or reconstructed well ?                                                                                 |  |                              |  | Construction Type Drilled                                               |  |                                                      |  |                       |  |
| <b>3. Well serves</b> 1 # of HOME                                      |  |                                                                      |                                                      | Hicap Well ? No                                 |  | 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          |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| 10 Surface 41                                                          |  |                                                                      | No Rotary - Mud Circulation ..... Yes                |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| 6 41 104                                                               |  |                                                                      | No Rotary - Air ..... No                             |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
|                                                                        |  |                                                                      | No Rotary - Air & Foam ..... No                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
|                                                                        |  |                                                                      | No Drill-Through Casing Hammer                       |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
|                                                                        |  |                                                                      | No Reverse Rotary                                    |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
|                                                                        |  |                                                                      | Yes Cable-tool Bit 10in. dia... No                   |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
|                                                                        |  |                                                                      | No Dual Rotary ..... No                              |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
|                                                                        |  |                                                                      | No Temp. Outer Casing 12in. dia                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
|                                                                        |  |                                                                      | Yes Removed? 4depth ft. (If NO explain on back side) |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| <b>8. Geology</b>                                                      |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| Geology Codes                                                          |  |                                                                      |                                                      | Type, Caving/Noncaving, Color, Hardness, etc... |  |                                                                                                                             |  | From (ft.)                   |  | To (ft.)                                                                |  |                                                      |  |                       |  |
| O Q S S                                                                |  |                                                                      |                                                      | O-ORANGE Q-CAVING S-SAND S-SANDY                |  |                                                                                                                             |  | Surface                      |  | 4                                                                       |  |                                                      |  |                       |  |
| I H N N                                                                |  |                                                                      |                                                      | I-WHITE H-HARD/FIRM N-SANDSTONE N-W/SANDSTONE   |  |                                                                                                                             |  | 4                            |  | 104                                                                     |  |                                                      |  |                       |  |
| <b>6. Casing, Liner, Screen</b>                                        |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| Dia. (in.)                                                             |  | Material, Weight, Specification<br>Manufacturer & Method of Assembly |                                                      |                                                 |  | From (ft.)                                                                                                                  |  | To (ft.)                     |  |                                                                         |  |                                                      |  |                       |  |
| 6                                                                      |  | 18.97 STEEL ASTM A53 GRADE B WELDED JOINT WHEATLAND                  |                                                      |                                                 |  | Surface                                                                                                                     |  | 41                           |  |                                                                         |  |                                                      |  |                       |  |
| Dia. (in.)                                                             |  | Screen type, material & slot size                                    |                                                      |                                                 |  | From (ft.)                                                                                                                  |  | To (ft.)                     |  |                                                                         |  |                                                      |  |                       |  |
|                                                                        |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| <b>7. Grout or Other Sealing Material</b>                              |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| Method TREMIE PIPE - PUMPED                                            |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| Kind of Sealing Material                                               |  |                                                                      |                                                      | From (ft.)                                      |  | To (ft.)                                                                                                                    |  | # Sacks Cement               |  |                                                                         |  |                                                      |  |                       |  |
| NATIVE SOIL                                                            |  |                                                                      |                                                      | Surface                                         |  | 4                                                                                                                           |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| NEAT CEMENT GROUT                                                      |  |                                                                      |                                                      | 4                                               |  | 41                                                                                                                          |  | 12 S                         |  |                                                                         |  |                                                      |  |                       |  |
| <b>9. Static Water Level</b>                                           |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| 41 ft. below ground surface                                            |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| <b>10. Pump Test</b>                                                   |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| Pumping level 45 ft. below surface                                     |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| Pumping at 15 GP M for 2 Hrs.                                          |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| Pumping Method ? Other                                                 |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| <b>11. Well Is</b>                                                     |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| 14 in. above grade                                                     |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| Developed ? Yes                                                        |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| Disinfected ? Yes                                                      |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| Capped ? Yes                                                           |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| <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>                           |  |                                                                      |                                                      |                                                 |  |                                                                                                                             |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| DWS                                                                    |  |                                                                      |                                                      | Lic # 38                                        |  | Date Signed 11-08-2024                                                                                                      |  |                              |  |                                                                         |  |                                                      |  |                       |  |
| Drill Rig Operator                                                     |  |                                                                      |                                                      | Lic or Reg #                                    |  | Date Signed                                                                                                                 |  |                              |  |                                                                         |  |                                                      |  |                       |  |

**4a. Potential Contamination Sources**

Is the well located in floodplain ? No

Comment:

Created On: 11-14-2024

Updated On: 07-07-2025

Review Status: APPROVED