

|                                                                                                                   |                                                                      |               |                                                                                                                                                                                                                                                                                                                              |                                                              |          |                                                                                                                             |                    |                                                                                                                                                          |                                                                                                                    |                |                       |  |
|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|---------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|----------|-----------------------------------------------------------------------------------------------------------------------------|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|----------------|-----------------------|--|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b>                                            |                                                                      |               |                                                                                                                                                                                                                                                                                                                              | <b>ACI772</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 NO LIMITS CONSTRUCTION                                                                             |                                                                      |               |                                                                                                                                                                                                                                                                                                                              |                                                              |          | Phone #                                                                                                                     |                    |                                                                                                                                                          |                                                                                                                    |                |                       |  |
| Mailing Address 81 161ST STREET                                                                                   |                                                                      |               |                                                                                                                                                                                                                                                                                                                              |                                                              |          | Town of LINCOLN                                                                                                             |                    |                                                                                                                                                          |                                                                                                                    |                |                       |  |
| City AMERY State WI Zip Code 54001                                                                                |                                                                      |               |                                                                                                                                                                                                                                                                                                                              |                                                              |          | Street Address or Road Name and Number<br>759 115TH STREET                                                                  |                    |                                                                                                                                                          |                                                                                                                    |                |                       |  |
| County Polk                                                                                                       |                                                                      | Co. Permit #  |                                                                                                                                                                                                                                                                                                                              | Notification #                                               |          | Completed<br>04-22-2026                                                                                                     |                    | Subdivision Name                                                                                                                                         |                                                                                                                    |                | Lot # Block #         |  |
| Well Constructor (Business Name)<br>MCCULLOUGH AND SONS                                                           |                                                                      |               |                                                                                                                                                                                                                                                                                                                              | Lic. #<br>44                                                 |          | Facility ID # (Public Wells)                                                                                                |                    | Latitude / Longitude in Decimal Degree (DD)<br>45.31615 °N -92.406 °W                                                                                    |                                                                                                                    |                | Method Code<br>SCR002 |  |
| Address 20335 FOREST BOULEVARD NORTH<br>FOREST LAKE MN 55025-9764                                                 |                                                                      |               |                                                                                                                                                                                                                                                                                                                              | Well Plan Approval #                                         |          | NW SW Section Township Range<br>or Govt Lot # 30 33 N 16 W                                                                  |                    | <b>2. Well Type</b> New Well<br>of previous unique well # constructed in<br>Reason for replaced or reconstructed well ?<br><br>Construction Type Drilled |                                                                                                                    |                |                       |  |
|                                                                                                                   |                                                                      |               |                                                                                                                                                                                                                                                                                                                              | Approval Date (mm-dd-yyyy)                                   |          |                                                                                                                             |                    |                                                                                                                                                          |                                                                                                                    |                |                       |  |
| Hicap Permanent Well #                                                                                            |                                                                      | Common Well # |                                                                                                                                                                                                                                                                                                                              | Specific Capacity<br>0.4                                     |          |                                                                                                                             |                    |                                                                                                                                                          |                                                                                                                    |                |                       |  |
| <b>3. Well serves</b> 1 # of HOME<br>Private,potable<br>Heat Exchange ___ # of drillholes                         |                                                                      |               |                                                                                                                                                                                                                                                                                                                              | Hicap Well ? No<br>Hicap Property ? No<br>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 |                                                                                                                                                          | Geology Codes                                                                                                      |                |                       |  |
| 8                                                                                                                 | Surface                                                              | 82            | Yes Rotary - Mud Circulation ..... No<br>No Rotary - Air ..... No<br>No Rotary - Air & Foam ..... No<br>No Drill-Through Casing Hammer<br>No Reverse Rotary<br>No Cable-tool Bit ___ in. dia... No<br>No Dual Rotary ..... No<br>No Temp. Outer Casing ___ in. dia<br>No Removed? ___ depth ft. (If NO explain on back side) |                                                              |          |                                                                                                                             |                    |                                                                                                                                                          | Type, Caving/Noncaving, Color, Hardness, etc...<br>S I S-SAND I-W/SOIL-ORGANIC Surface 5<br>Y Y-SAND & GRAVEL 5 82 |                |                       |  |
| <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><br>30 ft. below ground surface                                                                 |                    |                                                                                                                                                          | <b>11. Well Is</b><br>12 in. above grade                                                                           |                |                       |  |
| 4                                                                                                                 | NORTH AMERICAN PLASTIC SDR 21 F-480                                  |               |                                                                                                                                                                                                                                                                                                                              | Surface                                                      | 78       | <b>10. Pump Test</b><br>Pumping level 80 ft. below surface<br>Pumping at 22 GP M for 1 Hrs.<br>Pumping Method ? Airlift     |                    |                                                                                                                                                          | Developed ? Yes<br>Disinfected ? Yes<br>Capped ? Yes                                                               |                |                       |  |
| Dia. (in.)                                                                                                        | Screen type, material & slot size                                    |               |                                                                                                                                                                                                                                                                                                                              | From (ft.)                                                   | To (ft.) |                                                                                                                             |                    |                                                                                                                                                          |                                                                                                                    |                |                       |  |
| 4                                                                                                                 | JOHNSON STAINLESS 15 SLOT 6'                                         |               |                                                                                                                                                                                                                                                                                                                              | 78                                                           | 82       |                                                                                                                             |                    |                                                                                                                                                          |                                                                                                                    |                |                       |  |
| <b>7. Grout or Other Sealing Material</b>                                                                         |                                                                      |               |                                                                                                                                                                                                                                                                                                                              |                                                              |          |                                                                                                                             |                    |                                                                                                                                                          |                                                                                                                    |                |                       |  |
| Method TREMIE PIPE - PUMPED                                                                                       |                                                                      |               |                                                                                                                                                                                                                                                                                                                              |                                                              |          |                                                                                                                             |                    |                                                                                                                                                          |                                                                                                                    |                |                       |  |
| Kind of Sealing Material                                                                                          |                                                                      | From (ft.)    | To (ft.)                                                                                                                                                                                                                                                                                                                     | # Sacks Cement                                               |          |                                                                                                                             |                    |                                                                                                                                                          |                                                                                                                    |                |                       |  |
| HIGH SOLIDS BENTONITE                                                                                             |                                                                      | Surface       | 72                                                                                                                                                                                                                                                                                                                           | 6 S                                                          |          |                                                                                                                             |                    |                                                                                                                                                          |                                                                                                                    |                |                       |  |
| <b>12. Notified Owner of need to fill &amp; seal ?</b> No<br><br><b>Filled &amp; Sealed Well(s) as needed?</b> No |                                                                      |               |                                                                                                                                                                                                                                                                                                                              |                                                              |          |                                                                                                                             |                    |                                                                                                                                                          |                                                                                                                    |                |                       |  |
| <b>13. Constructor / Supervisory Driller</b>                                                                      |                                                                      |               |                                                                                                                                                                                                                                                                                                                              |                                                              |          | Lic #                                                                                                                       |                    | Date Signed                                                                                                                                              |                                                                                                                    |                |                       |  |
| DM                                                                                                                |                                                                      |               |                                                                                                                                                                                                                                                                                                                              |                                                              |          | 72                                                                                                                          |                    | 04-24-2026                                                                                                                                               |                                                                                                                    |                |                       |  |
| <b>Drill Rig Operator</b>                                                                                         |                                                                      |               |                                                                                                                                                                                                                                                                                                                              |                                                              |          | Lic or Reg #                                                                                                                |                    | Date Signed                                                                                                                                              |                                                                                                                    |                |                       |  |
| DM                                                                                                                |                                                                      |               |                                                                                                                                                                                                                                                                                                                              |                                                              |          | 7343                                                                                                                        |                    | 04-24-2026                                                                                                                                               |                                                                                                                    |                |                       |  |

**4a. Potential Contamination Sources**Is the well located in floodplain ? No

| Type                         | Qualifier | Distance | Type                      | Qualifier | Distance |
|------------------------------|-----------|----------|---------------------------|-----------|----------|
| Sewer - Collector - Sanitary |           | 52       | Sewer - Building Sanitary |           | 130      |

Comment:

Created On: 10-06-2025

Updated On: 05-20-2026

Review Status: APPROVED