

|                                                                                 |  |                                                                      |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                                                                      |  |                                                                                                                                                                                                                  |  |
|---------------------------------------------------------------------------------|--|----------------------------------------------------------------------|--|----------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b>          |  |                                                                      |  | <b>ACJ603</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 ROEPKE THOMAS                                                    |  |                                                                      |  | Phone #                    |  | <b>1. Well Location</b>                                                                                                                                                                                                                                                                                                      |  |                                                                      |  | Fire # (if avail.)                                                                                                                                                                                               |  |
| Mailing Address 738 ISLE OF B                                                   |  |                                                                      |  |                            |  | Town of LINCOLN                                                                                                                                                                                                                                                                                                              |  |                                                                      |  | 738                                                                                                                                                                                                              |  |
| City EAGLE RIVER                                                                |  |                                                                      |  | State WI                   |  | Zip Code 54521                                                                                                                                                                                                                                                                                                               |  |                                                                      |  | Street Address or Road Name and Number<br>ISLE OF B                                                                                                                                                              |  |
| County Vilas                                                                    |  | Co. Permit #                                                         |  | Notification # 10036785701 |  | Completed 10-24-2025                                                                                                                                                                                                                                                                                                         |  | Subdivision Name                                                     |  | Lot #<br>Block #                                                                                                                                                                                                 |  |
| Well Constructor (Business Name)<br>ZDROIK WELL DRILLING AND PUMP SERVICES, LLC |  |                                                                      |  | Lic. # 9221                |  | Facility ID # (Public Wells)                                                                                                                                                                                                                                                                                                 |  | Latitude / Longitude in Decimal Degree (DD)<br>45.8895 °N -89.209 °W |  | Method Code<br>SCR002                                                                                                                                                                                            |  |
| Address 5900 ROBIN DR.<br>EAGLE RIVER WI 54521                                  |  |                                                                      |  | Well Plan Approval #       |  | SE SW Section Township Range<br>or Govt Lot # 2 39 N 10 E                                                                                                                                                                                                                                                                    |  | <b>2. Well Type</b> New Well                                         |  |                                                                                                                                                                                                                  |  |
| Hicap Permanent Well #                                                          |  |                                                                      |  | Common Well #              |  | Specific Capacity 4                                                                                                                                                                                                                                                                                                          |  | of previous unique well # constructed in                             |  |                                                                                                                                                                                                                  |  |
| <b>3. Well serves</b> 1 # of HOME                                               |  |                                                                      |  | Hicap Well ? No            |  | Hicap Property ? No                                                                                                                                                                                                                                                                                                          |  | Reason for replaced or reconstructed well ?                          |  |                                                                                                                                                                                                                  |  |
| Private,potable                                                                 |  |                                                                      |  | Hicap Potable ? No         |  | Construction Type Drilled                                                                                                                                                                                                                                                                                                    |  |                                                                      |  |                                                                                                                                                                                                                  |  |
| Heat Exchange ___ # of drillholes                                               |  |                                                                      |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                                                                      |  |                                                                                                                                                                                                                  |  |
| <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                                                   |  | <b>8. Geology</b>                                                                                                                                                                                                |  |
| 6                                                                               |  | Surface                                                              |  | 82                         |  | No Rotary - Mud Circulation ..... No<br>No Rotary - Air ..... No<br>No Rotary - Air & Foam ..... No<br>Yes 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) |  |                                                                      |  | Geology Codes Type, Caving/Noncaving, Color, Hardness, etc... From (ft.) To (ft.)<br>S S-SAND Surface 20<br>G Y G-GRAY Y-SAND & GRAVEL 20 70<br>T Y T-TAN/BROWN Y-SAND & GRAVEL 70 75<br>G G-GRAVEL/STONES 75 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>                                                                                                                                                                                     |  |
| 6                                                                               |  | 6" 280 WALL 20' BLK PE                                               |  |                            |  | Surface                                                                                                                                                                                                                                                                                                                      |  | 79                                                                   |  | 10 ft. below ground surface                                                                                                                                                                                      |  |
| Dia. (in.)                                                                      |  | Screen type, material & slot size                                    |  |                            |  | From (ft.)                                                                                                                                                                                                                                                                                                                   |  | To (ft.)                                                             |  | <b>11. Well Is</b>                                                                                                                                                                                               |  |
| 6                                                                               |  | OPEN HOLE                                                            |  |                            |  | 79                                                                                                                                                                                                                                                                                                                           |  | 82                                                                   |  | 36 in. above grade<br>Developed ? Yes<br>Disinfected ? Yes<br>Capped ? Yes                                                                                                                                       |  |
| <b>7. Grout or Other Sealing Material</b>                                       |  |                                                                      |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                                                                      |  |                                                                                                                                                                                                                  |  |
| Method MOUNDED                                                                  |  |                                                                      |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                                                                      |  |                                                                                                                                                                                                                  |  |
| Kind of Sealing Material                                                        |  | From (ft.)                                                           |  | To (ft.)                   |  | # Sacks Cement                                                                                                                                                                                                                                                                                                               |  | <b>12. Notified Owner of need to fill &amp; seal ?</b> No            |  |                                                                                                                                                                                                                  |  |
| GRANULAR BENTONITE                                                              |  | Surface                                                              |  | 15                         |  | 0.5 S                                                                                                                                                                                                                                                                                                                        |  | Filled & Sealed Well(s) as needed? No                                |  |                                                                                                                                                                                                                  |  |
| <b>13. Constructor / Supervisory Driller</b>                                    |  |                                                                      |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                                                                      |  |                                                                                                                                                                                                                  |  |
| JZ                                                                              |  | Lic #                                                                |  | 7837                       |  | Date Signed                                                                                                                                                                                                                                                                                                                  |  | 10-30-2025                                                           |  |                                                                                                                                                                                                                  |  |
| Drill Rig Operator                                                              |  | Lic or Reg #                                                         |  | 7837                       |  | Date Signed                                                                                                                                                                                                                                                                                                                  |  | 10-30-2025                                                           |  |                                                                                                                                                                                                                  |  |

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

| Type                                                 | Qualifier | Distance | Type                                                      | Qualifier | Distance |
|------------------------------------------------------|-----------|----------|-----------------------------------------------------------|-----------|----------|
| POWTS holding component (also known as holding tank) | >         | 25       | POWTS dispersal component (soil absorption unit or mound) | >         | 50       |

Comment:

Created On: 10-28-2025

Updated On: 12-07-2025

Review Status: APPROVED