

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				ACK813		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A									
Property Owner WILDER DWAYNE						Phone #		1. Well Location				Fire # (if avail.)							
Mailing Address W548 COUNTY RD A						Town of BURNS						W548							
City MINDORO						State WI		Zip Code 54644				Street Address or Road Name and Number W548 COUNTY RD A							
County La Crosse		Co. Permit # 2025071		Notification # 10097519501		Completed 12-10-2025		Subdivision Name				Lot #		Block #					
Well Constructor (Business Name) WELL PROS PUMP & WELL DRILLING SERVICES LLC				Lic. # 7970		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD) 44.05048 °N -90.93603 °W				Method Code SCR002					
Address N5550 CTY RD Z STE 3B ONALASKA WI 54650				Well Plan Approval #		SE NE Section Township Range or Govt Lot # 11 18 N 5 W		2. Well Type Replacement				of previous unique well #		constructed in					
Approval Date (mm-dd-yyyy)				Reason for replaced or reconstructed well ? FAILED		Construction Type Drilled													
Hicap Permanent Well #		Common Well #		Specific Capacity 0															
3. Well serves 1 # of HOMES				Hicap Well ? No															
Private, potable				Hicap Property ? No															
Heat Exchange ___ # of drillholes				Hicap Potable ? No															
4. Potential Contamination Sources - ON REVERSE SIDE																			
5. Drillhole Dimensions and Construction Method												8. Geology							
Dia. (in.)		From (ft.)		To (ft.)		Upper Enlarged Drillhole				Lower Open Bedrock		Geology Codes		Type, Caving/Noncaving, Color, Hardness, etc...		From (ft.)		To (ft.)	
4		Surface		69		No Rotary - Mud Circulation				No		Y		Y-SAND & GRAVEL		Surface		69	
						No Rotary - Air				No									
						No Rotary - Air & Foam				No									
						No Drill-Through Casing Hammer													
						No Reverse Rotary													
						Yes Cable-tool Bit 4in. dia...				No									
						No Dual Rotary				No									
						No Temp. Outer Casing ___ in. dia													
						No Removed? ___ depth ft. (If NO explain on back side)													
6. Casing, Liner, Screen												9. Static Water Level				11. Well Is			
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		10 ft. below ground surface				17 in. above grade					
4		BLACK STEEL, 11#/FT,ASTMA 53, WHEATLAND, T&C				Surface		63		10. Pump Test				Developed ? Yes					
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping level 50 ft. below surface				Disinfected ? Yes					
3		TYPE 304 STAINLESS STEEL 12 SLOT				63		69		Pumping at 15 GP M for 3 Hrs.				Capped ? Yes					
										Pumping Method ? Test Pump									
7. Grout or Other Sealing Material												12. Notified Owner of need to fill & seal ? Yes							
Method MOUNDED																			
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement		Filled & Sealed Well(s) as needed? Yes									
GRANULAR BENTONITE				Surface		63		3 S											
13. Constructor / Supervisory Driller								Lic #		Date Signed									
MI								7411		12-10-2025									
Drill Rig Operator								Lic or Reg #		Date Signed									
ZA								9291		12-10-2025									

4a. Potential Contamination Sources

Is the well located in floodplain ? No

Comment:

Created On: 12-10-2025

Updated On: 01-13-2026

Review Status: APPROVED