

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				ACL184		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A		
Property Owner ROBERT LECIEJEWSKI Phone # (812)303-2929						1. Well Location Fire # (if avail.) 29730						
Mailing Address 3524 E SCHMITT LANE City EVANSVILLE State IN Zip Code 47711						City of ASHLAND Street Address or Road Name and Number WOODLAND RD						
County Bayfield		Co. Permit #		Notification # 10086953801		Completed 12-15-2025		Subdivision Name			Lot # Block #	
Well Constructor (Business Name) ANDERSON, PAUL R				Lic. # 4681		Facility ID # (Public Wells)		Latitude / Longitude in Decimal Degree (DD) 46.5172 °N -90.9553 °W			Method Code GPS008	
Address PAUL R ANDERSON WELL DRILLING 60995 WIBERG RD ASHLAND WI 54806				Well Plan Approval #		SW SE Section Township Range		or Govt Lot # 26 47 N 5 W				
				Approval Date (mm-dd-yyyy)		26 47 N 5 W						
Hicap Permanent Well #		Common Well #		Specific Capacity 0		2. Well Type Replacement of previous unique well # constructed in Reason for replaced or reconstructed well ? NOT ENOUGH WATER IN OLD WELL						
3. Well serves 1 # of HOME Private, potable Drillhole Heat Exchange ___ # of drillholes				Hicap Well ? No		Hicap Property ? No		Hicap Potable ? No		Construction Type Drilled		
4. Potential Contamination Sources - ON REVERSE SIDE												
5. Drillhole Dimensions and Construction Method												
Dia. (in.)		From (ft.)		To (ft.)		Upper Enlarged Drillhole		Lower Open Bedrock		8. Geology Geology Codes Type, Caving/Noncaving, Color, Hardness, etc...		
8		Surface		6		No Rotary - Mud Circulation		No		R V C C R-RED V-NON-CAVING C-CLAY C-CLAYEY Surface 20		
4		6		100		No Rotary - Air		No		R Q C C R-RED Q-CAVING C-CLAY C-CLAYEY 20 97		
						No Rotary - Air & Foam		No		T W S S T-TAN/BROWN W-WATER BEARING S-SAND S-SANDY 97 100		
						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												
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		11. Well Is 12 in. above grade		
4.5		OD 4 INCH ID T&C ASTM A-53-B WEATLAND				Surface		97		Developed ? Yes		
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Disinfected ? Yes		
2		10 SLOT SCREEN 4X2 KPACK				97		100		Capped ? Yes		
7. Grout or Other Sealing Material												
Method												
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement				
GRANULAR BENTONITE				Surface		6		6 S				
9. Static Water Level 10 ft. below ground surface												
10. Pump Test Pumping level 60 ft. below surface Pumping at 10 GP M for 2 Hrs. Pumping Method ? Test Pump												
12. Notified Owner of need to fill & seal ? No Filled & Sealed Well(s) as needed? Yes NOT ENOUGH WATER												
13. Constructor / Supervisory Driller						Lic #		Date Signed				
PA						4681		01-06-2026				
Drill Rig Operator						Lic or Reg #		Date Signed				
BH						7739		01-06-2026				

4a. Potential Contamination SourcesIs the well located in floodplain ? No

Type	Qualifier	Distance
POWTS holding component (also known as holding tank)	>	25

Comment:

Created On: 01-06-2026

Updated On: 01-29-2026

Review Status: APPROVED