

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				ACL453		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A	
Property Owner KRAHN, JEFF					Phone #			1. Well Location Fire # (if avail.) Town of MARION W7036 Street Address or Road Name and Number SILVERCRYST RD.			
Mailing Address PO BOX 536											
City WAUTOMA			State WI		Zip Code 54982			Subdivision Name Lot # Block #			
County Waushara		Co. Permit #		Notification # 10133718701		Completed 01-18-2026					
Well Constructor (Business Name) JENKS, TIMOTHY J				Lic. # 4458		Latitude / Longitude in Decimal Degree (DD)				Method Code	
				Facility ID # (Public Wells)				44.05948 °N -89.23467 °W			
Address JENKS WELL DRILLING W4849 ASPEN CT. WILD ROSE WI 54984				Well Plan Approval #				NW SE		Section Township Range	
				Approval Date (mm-dd-yyyy)				6 18 N		11 E	
Hicap Permanent Well #			Common Well #		Specific Capacity 2.2			2. Well Type Replacement of previous unique well # constructed in Reason for replaced or reconstructed well ? FAILED 2" WELL Construction Type Drilled			
3. Well serves 1 # of HOME			Hicap Well ? No		Hicap Property ? No						
Private, potable			Hicap Potable ? No								
Heat Exchange ___ # of drillholes											
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	
4		Surface		58		No Rotary - Mud Circulation		No		T Q Y T-TAN/BROWN Q-CAVING Y-SAND & GRAVEL Surface 25	
						No Rotary - Air		No		T Q S M T-TAN/BROWN Q-CAVING S-SAND M-SILTY 25 52	
						No Rotary - Air & Foam		No		T W S T-TAN/BROWN W-WATER BEARING S-SAND 52 58	
						No Drill-Through Casing Hammer					
						No Reverse Rotary					
						No Cable-tool Bit ___ in. 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 14 in. above grade Developed ? Yes Disinfected ? Yes Capped ? Yes	
4		MARUICHI LEAVITT P.E. WELDED .237 WALL				Surface		54			
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)			
4		10 SLOT SS				54		58			
7. Grout or Other Sealing Material											
Method MOUNDED											
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement			
GRANULAR BENTONITE				Surface				1 S			
9. Static Water Level 19 ft. below ground surface											
10. Pump Test Pumping level 28 ft. below surface Pumping at 20 GP M for 1 Hrs. Pumping Method ? Other											
12. Notified Owner of need to fill & seal ? Yes Filled & Sealed Well(s) as needed? Yes											
13. Constructor / Supervisory Driller						Lic #		Date Signed			
TJ						4458		01-22-2026			
Drill Rig Operator						Lic or Reg #		Date Signed			

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Sewer - Collector - Sanitary		45	Sewer - Building Sanitary		12

Comment:

Created On: 01-28-2026

Updated On: 02-18-2026

Review Status: APPROVED