

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				ACL665		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A							
Property Owner PETERSON VON						Phone #		1. Well Location				Fire # (if avail.)					
Mailing Address 823 SUMMER ST						Town of WASHINGTON						5900					
City EAU CLAIRE						State WI		Zip Code 54701				Street Address or Road Name and Number SUMMER RD					
County Eau Claire		Co. Permit # 35160		Notification # 10143029901		Completed 02-12-2026		Subdivision Name				Lot # Block #					
Well Constructor (Business Name) FEDIE, DONALD S				Lic. # 127		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD) 44.7471 °N -91.4498 °W				Method Code GPS008			
Address FEDIE WELL DRILLING & PUMP SERVICE INC W536 U S HWY 10 MONDOVI WI 54755-7729				Well Plan Approval #		NE SE Section Township Range or Govt Lot # 10 26 N 9 W		2. Well Type New Well of previous unique well # constructed in Reason for replaced or reconstructed well ? Construction Type Drilled									
				Approval Date (mm-dd-yyyy)													
Hicap Permanent Well #		Common Well #		Specific Capacity 0													
3. Well serves 1 # of HOME Private, potable Drillhole Heat Exchange ___ # of drillholes				Hicap Well ? No Hicap Property ? No Hicap Potable ? No													
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		Geology Codes		Type, Caving/Noncaving, Color, Hardness, etc...		From (ft.)		To (ft.)	
10		Surface		6		No Rotary - Mud Circulation		No		T S		T-TAN/BROWN S-SAND		Surface		31	
6		6		70		No Rotary - Air		No		T H N		T-TAN/BROWN H-HARD/FIRM N-SANDSTONE		31		70	
						No Rotary - Air & Foam		No									
						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												8. Geology					
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		45 ft. below ground surface				11. Well Is 18 in. above grade			
6		STEEL PIPE 19.45 WHEATLAND T/C				Surface		32		10. Pump Test Pumping level 50 ft. below surface Pumping at 10 GP M for 1 Hrs. Pumping Method ? Test Pump				Developed ? Yes Disinfected ? Yes Capped ? Yes			
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)									
7. Grout or Other Sealing Material Method MOUNDED												12. Notified Owner of need to fill & seal ? No					
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement		Filled & Sealed Well(s) as needed? No							
GRANULAR BENTONITE				Surface		6		3 S									
13. Constructor / Supervisory Driller												Lic #		Date Signed			
DSF												127		02-12-2026			
Drill Rig Operator												Lic or Reg #		Date Signed			
DSF												127		02-12-2026			

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS holding component (also known as holding tank)		80	POWTS dispersal component (soil absorption unit or mound)		110
			Sewer - Building Sanitary		75

Comment:

Created On: 02-13-2026

Updated On: 05-29-2026

Review Status: APPROVED