

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				ACM092		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A									
Property Owner HARP DEVELOPMENT					Phone #			1. Well Location				Fire # (if avail.)							
Mailing Address 1414 MILLA WAY								Town of BURLINGTON											
City BURLINGTON					State WI		Zip Code 53105		Street Address or Road Name and Number				1414 MILLA WAY						
County Racine		Co. Permit #		Notification # 10149701704		Completed 03-04-2026		Subdivision Name			Lot #		Block #						
Well Constructor (Business Name)				Lic. # 6519		Facility ID # (Public Wells)		Latitude / Longitude in Decimal Degree (DD)				Method Code							
KRIZAN, KENNETH J								42.7007 °N -88.2323 °W				GPS008							
Address 23900 W OVERSON RD UNION GROVE WI 53182-9659				Well Plan Approval #		SE SE		Section 22		Township 3 N		Range 19 E							
				Approval Date (mm-dd-yyyy)		or Govt Lot #													
Hicap Permanent Well #		Common Well #		Specific Capacity 0				2. Well Type New Well											
								of previous unique well #				constructed in							
								Reason for replaced or reconstructed well ?											
3. Well serves 1 # of HOME				Hicap Well ? No															
Private, potable				Hicap Property ? No															
Heat Exchange ___ # of drillholes				Hicap Potable ? No				Construction Type Drilled											
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.)			
6		Surface		81		No Rotary - Mud Circulation		No		X		X-SAND & CLAY		Surface		25			
						No Rotary - Air		No		S		S-SAND		25		55			
						No Rotary - Air & Foam		No		Y		Y-SAND & GRAVEL		55		68			
						Yes Drill-Through Casing Hammer				L		L-LIMESTONE/DOLOMITE		68		81			
						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												9. Static Water Level				11. Well Is			
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		33 ft. below ground surface				18 in. above grade					
6		NUCORE ASTM A 53B 6.625X.280 FULL 20 WELDED				Surface		68		10. Pump Test				Developed ? Yes					
										Pumping level 70 ft. below surface				Disinfected ? Yes					
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping at 30 GP M for 1 Hrs.				Capped ? Yes					
										Pumping Method ? Airlift									
7. Grout or Other Sealing Material												12. Notified Owner of need to fill & seal ? No							
Method MOUNDED																			
Kind of Sealing Material		From (ft.)		To (ft.)		# Sacks Cement				Filled & Sealed Well(s) as needed?				No					
GRANULAR BENTONITE		Surface		68															
												13. Constructor / Supervisory Driller				Lic #		Date Signed	
												KK				6519		03-09-2026	
												Drill Rig Operator				Lic or Reg #		Date Signed	

4a. Potential Contamination Sources

Is the well located in floodplain ? No

Comment:

Created On: 03-09-2026

Updated On: 04-08-2026

Review Status: APPROVED