Well Construction Report
WISCONSIN UNIQUE WELL NUMBER ACM296

Drinking Water and Groundwater - DG/5
Department of Natural Resources, Box 7921
Madison WI 53707
Form 3300-077A

Property Owner: KEISER MICHAEL ARCHER NORTH LLC		Phone #: (715)323-8509
Mailing Address: 1697 LEOPOLD WAY		
City: NEKOOSA	State: WI	Zip Code: 54457

County	Co. Permit #	Notification #	Completed
Adams		10169997401	03-13-2026

Well Constructor (Business Name)	Lic. #	Facility ID # (Public Wells)
ROTH WELL DRILLING	5857	

Address: PO BOX 532
NEKOOSA WI 54457

Well Plan Approval #

Approval Date (mm-dd-yyyy)

Hicap Permanent Well #	Common Well #	Specific Capacity
		5

3. Well serves 1 # of HOME
Private,potable
Heat Exchange____# of drillholes

Hicap Well ? No
Hicap Property ? No
Hicap Potable ? No

1. Well Location
Town of ROME

Fire # (if avail.)

Street Address or Road Name and Number
SEDGE 55

Subdivision Name	Lot #	Block #

Latitude / Longitude in Decimal Degree (DD)				Method Code
44.1804 °N	-89.8652 °W			SCR002

SW NE or Govt Lot #	Section	Township	Range
	26	20 N	5 E

2. Well Type New Well
of previous unique well # constructed in

Reason for replaced or reconstructed well ?

Construction Type Drilled

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
6	Surface	63

Upper Enlarged Drillhole		Lower Open Bedrock
No	Rotary - Mud Circulation	No
No	Rotary - Air	No
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)	

8. Geology

Geology Codes	Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
S	S-SAND	Surface	32
C	C-CLAY	32	47
Y	Y-SAND & GRAVEL	47	63

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6.625	A 53 B .280 SAWHILL WELDED	Surface	59
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
6	TELE JOHNSON SS 12 SLOT	59	63

7. Grout or Other Sealing Material
Method MOUNDED

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
GRANULAR BENTONITE	Surface	59	2 S

9. Static Water Level
36 ft. below ground surface

10. Pump Test
Pumping level 40 ft. below surface
Pumping at 20 GP M for 1 Hrs.
Pumping Method ? Test Pump

11. Well Is
15 in. above grade
Developed ? Yes
Disinfected ? Yes
Capped ? Yes

12. Notified Owner of need to fill & seal ? No

Filled & Sealed Well(s) as needed? No

13. Constructor / Supervisory Driller	Lic #	Date Signed
KR	4495	03-24-2026
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
MG	3740	03-24-2026

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS treatment component (septic tanks, aerobic treatment units or filters)	>	25	POWTS dispersal component (soil absorption unit or mound)	>	50

Comment:

Created On: 03-24-2026 Updated On: 05-11-2026 Review Status: APPROVED