

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				ACM406		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A					
Property Owner BINNEBOSE, JAY						Phone #		1. Well Location				Fire # (if avail.)			
Mailing Address 551 HILLSIDE AVE. GLEN ELLYN IL 60137						Town of GERMANTOWN						W5685			
City GLEN ELLYN						State IL		Zip Code 60137				Street Address or Road Name and Number ISLAND CT.			
County Juneau		Co. Permit #		Notification # 10201204202		Completed 03-30-2026		Subdivision Name ISLAND LAKE				Lot # 71		Block #	
Well Constructor (Business Name) WALKER, BRUCE A				Lic. # 6143		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD) 43.94735 °N -90.055 °W				Method Code SCR002	
Address WISCONSIN WELL & WATER SYSTEMS LLC 673 FERN AVE GRAND MARSH WI 53936				Well Plan Approval #				SW NW		Section 17		Township 17 N		Range 4 E	
				Approval Date (mm-dd-yyyy)				2. Well Type New Well							
Hicap Permanent Well #				Common Well #		Specific Capacity 0				of previous unique well # constructed in					
3. Well serves 1 # of HOME				Hicap Well ? No				Reason for replaced or reconstructed well ?							
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															
Dia. (in.)		From (ft.)		To (ft.)		Upper Enlarged Drillhole				Lower Open Bedrock					
8.5		Surface		64		Yes 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.)					
M		S		M-MEDIUM S-SAND				Surface		35					
A		S		A-COARSE S-SAND				35		64					
6. Casing, Liner, Screen															
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		9. Static Water Level					
4		CRESTLINE PVC 1120, SDR 21 200 PSI, ASTM 2265 F480				Surface		60		16 ft. below ground surface					
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		11. Well Is					
4		SS WW 15 SLOT				61		64		24 in. above grade					
7. Grout or Other Sealing Material															
Method TREMIE PIPE - PUMPED															
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement		10. Pump Test					
QUIK GROUT				Surface		50		6 S		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					
BW								6143		03-31-2026					
Drill Rig Operator								Lic or Reg #		Date Signed					
DC								9106		03-31-2026					

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

Type	Qualifier	Distance
Sewer - Building Sanitary	>	15

Comment:

WATER SAMPLE TO BE TAKEN AT TIME OF PUMP HOOK UP

Variance ID	Variance or Exception Type	Date	Reason
	Sample Submit Time	05/08/2026	

Created On: 03-31-2026

Updated On: 05-08-2026

Review Status: APPROVED