Well Construction Report
WISCONSIN UNIQUE WELL NUMBER ACM460

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

Form 3300-077A

Property Owner: DAVIS, TODD	Phone #
Mailing Address: 4807 BOLLIG CT	
City: NEKOOSA	State: WI — Zip Code: 54457
County: Wood	Co. Permit #: W26016 — Notification #: 10200006201 — Completed: 04-02-2026
Well Constructor (Business Name): ROCK SOLID WELL DRILLING LLC	Lic. #: 9321 — Facility ID # (Public Wells)
Address: 531 STATE HIGHWAY 73 NEKOOSA WI 54457	Well Plan Approval # — Approval Date (mm-dd-yyyy)
Hicap Permanent Well #	Common Well # — Specific Capacity: 3.8

1. Well Location

Town of PORT EDWARDS	Fire # (if avail.): 4807
Street Address or Road Name and Number: BOLLIG CT	
Subdivision Name	Lot # — Block #
Latitude / Longitude in Decimal Degree (DD): 44.2585 °N -89.9594 °W	Method Code: SCR002
SE NW or Govt Lot #:	Section: 31 — Township: 21 N — Range: 5 E

2. Well Type New Well
of previous unique well # — constructed in
Reason for replaced or reconstructed well ?
Construction Type: Drilled

3. Well serves 1 # of CAMPER
Private,potable
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.)
9	Surface	38

Upper Enlarged Drillhole		Lower Open Bedrock
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.)
	N	S		N-FINE S-SAND	Surface	22
		C	S	C-CLAY S-SANDY	22	30
		Y		Y-SAND & GRAVEL	30	38

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
5	F480 PVC, SDR 21, 200PSI, CRESLINE, GLUED	Surface	32
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
5	S. S. #15	32	38

7. Grout or Other Sealing Material

Method TREMIE PIPE - PUMPED

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
20% SOLID PUMPABLE BENT	Surface	30	4 S
SAND PACK	30	32	2 S
RED FLINT GRAVEL PACK #30	32	38	4 S

9. Static Water Level
12 ft. below ground surface

10. Pump Test
Pumping level 20 ft. below surface
Pumping at 30 GP M for 1 Hrs.
Pumping Method ? Airlift

11. Well Is
24 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
JP	9099	04-05-2026
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
JP	9099	04-05-2026

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

Type	Qualifier	Distance
POWTS treatment component (septic tanks, aerobic treatment units or filters)		150

Comment:

Created On: 04-05-2026 Updated On: 10-15-2026 Review Status: APPROVED