

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				ACM815		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A								
Property Owner MIKE WROBLESKI					Phone # (630)272-4083			1. Well Location				Fire # (if avail.)						
Mailing Address 588 KOHLEY RD LISLE ILL								Town of STEPHENSON				N8878						
City LISLE					State IL		Zip Code 54114		Street Address or Road Name and Number				LOUISA RD					
County Marinette		Co. Permit #		Notification # 10233353501		Completed 04-20-2026		Subdivision Name				Lot #		Block #				
Well Constructor (Business Name) ARNESON WELL DRILLING LLC					Lic. # 9278		Facility ID # (Public Wells)		Latitude / Longitude in Decimal Degree (DD) 45.2789 °N -88.0021 °W				Method Code GPS008					
Address 4680 WINDING CREEK TRAIL ABRAMS WI 54101					Well Plan Approval #		NW NW		Section 3		Township 32 N		Range 20 E					
					Approval Date (mm-dd-yyyy)		or Govt Lot #											
Hicap Permanent Well #			Common Well #		Specific Capacity 1.1		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		Construction Type Drilled											
Private, potable Drillhole					Hicap Property ? No													
Heat Exchange ___ # of drillholes					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.)		
8.75		Surface		40.5		Yes Rotary - Mud Circulation		No		T A S S		T-TAN/BROWN A-COARSE S-SAND S-SANDY		Surface		37		
6		40.5		50		No Rotary - Air		No		T F N N		T-TAN/BROWN F-FRACTURED N-SANDSTONE N-W/SANDSTONE		37		40.5		
						No Rotary - Air & Foam		Yes		T H N N		T-TAN/BROWN H-HARD/FIRM N-SANDSTONE N-W/SANDSTONE		40.5		50		
						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. Static Water Level		11. Well Is			
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		5 ft. below ground surface		16 in. above grade						
6		NEW P.E. 18.97 WHEATLAND A-53				Surface		40.5		10. Pump Test		Developed ? Yes						
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping level 50 ft. below surface		Disinfected ? Yes						
										Pumping at 50 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 TREMIE PIPE - PUMPED																		
Kind of Sealing Material			From (ft.)		To (ft.)		# Sacks Cement											
BAROID QUICK GROUT			Surface		40.5		5 S											
													13. Constructor / Supervisory Driller		Lic #		Date Signed	
													LA		7408		04-23-2026	
													Drill Rig Operator		Lic or Reg #		Date Signed	
													LA		8926		04-23-2026	

4a. Potential Contamination Sources

Is the well located in floodplain ? No

Comment: BRIX PLUMBING TO INSTALL WATER SYSTEM

Created On: 04-23-2026

Updated On: 05-26-2026

Review Status: APPROVED