

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				ACM922		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A											
Property Owner KUNICK, CRAIG						Phone # (920)676-0437		1. Well Location				Fire # (if avail.)									
Mailing Address 2643 US 45						Town of LINCOLN						2643									
City EAGLE RIVER						State WI		Zip Code 54521				Street Address or Road Name and Number									
City EAGLE RIVER						State WI		Zip Code 54521				US 45									
County Vilas		Co. Permit #		Notification # 10232506601		Completed 04-27-2026		Subdivision Name				Lot #		Block #							
Well Constructor (Business Name) RHINELANDER WELL DRILLING INC				Lic. # 632		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD) 45.9781 °N -89.2486 °W				Method Code GPS008							
Address PO BOX 584 3790 COUNTRY DR RHINELANDER WI 54501-0584				Well Plan Approval #		NW SE		Section 4		Township 40 N		Range 10 E									
						or Govt Lot #		4		40 N		10 E									
Approval Date (mm-dd-yyyy)				2. Well Type New Well				of previous unique well #				constructed in									
Hicap Permanent Well #				Common Well #		Specific Capacity 0.6				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		76		<u>No</u> Rotary - Mud Circulation <u>No</u> <u>No</u> Rotary - Air <u>No</u> <u>No</u> Rotary - Air & Foam <u>No</u> <u>No</u> Drill-Through Casing Hammer <u>No</u> Reverse Rotary <u>No</u> Cable-tool Bit ___ in. dia... <u>No</u> <u>Yes</u> Dual Rotary <u>No</u> <u>No</u> Temp. Outer Casing ___ in. dia <u>No</u> Removed? ___ depth ft. (If NO explain on back side)						T Q S		T-TAN/BROWN Q-CAVING S-SAND		Surface		15			
												G Y		G-GRAY Y-SAND & GRAVEL		15		40			
												G C		G-GRAY C-CLAY		40		66			
												T Y		T-TAN/BROWN Y-SAND & GRAVEL		66		76			
6. Casing, Liner, Screen														9. Static Water Level				11. Well Is			
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		15 ft. below ground surface				16 in. above grade							
6		A53 GRADE B PLAINEND WELDED WHEATLAND TUBE 19 LBS PER FT				Surface		73		10. Pump Test				Developed ? Yes Disinfected ? Yes Capped ? Yes							
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping level 46 ft. below surface											
6		STAINLESS STEEL ALLOY 15 SLOT				73		76		Pumping at 20 GP M for 1 Hrs.											
7. Grout or Other Sealing Material										Pumping Method ? Airlift											
Method MOUNDED										12. Notified Owner of need to fill & seal ? No											
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement		Filled & Sealed Well(s) as needed?				No							
GRANULAR BENTONITE				Surface				1													
13. Constructor / Supervisory Driller										Lic #		Date Signed									
DGF										8303		04-28-2026									
Drill Rig Operator										Lic or Reg #		Date Signed									
JCE										9286		04-28-2026									

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		80	Septic or Holding, or POWTS Tank		85

Comment:

Variance ID	Variance or Exception Type	Date	Reason
	Sample Submit Time	04/28/2026	NEW BUILD

Created On: 04-28-2026

Updated On: 05-28-2026

Review Status: APPROVED