# Well Construction Report
## *WISCONSIN UNIQUE WELL NUMBER* ACM944

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

| | |
|---|---|
| Property Owner | ROCKETMAN INVESTMENTS |
| Phone # | |
| Mailing Address | 4437 HWY 60 |
| City | SLINGER |
| State | WI |
| Zip Code | 53086 |
| County | Waukesha |
| Co. Permit # | |
| Notification # | 10128287901 |
| Completed | 04-24-2026 |
| Well Constructor (Business Name) | SWEENEY, KENNETH R |
| Lic. # | 583 |
| Facility ID # (Public Wells) | |
| Address | KEN SWEENEY WELL DRILLING & PUMPS 11221 W ST MARTINS RD FRANKLIN WI 53132-2331 |
| Well Plan Approval # | |
| Approval Date (mm-dd-yyyy) | |
| Hicap Permanent Well # | |
| Common Well # | |
| Specific Capacity | 0.7 |

**1. Well Location**
Village of LISBON
Fire # (if avail.)
Street Address or Road Name and Number: W257 N5916 AUTUMN WAY
Subdivision Name | Lot # | Block #
Latitude / Longitude in Decimal Degree (DD): 43.1254 °N -88.2597 °W
Method Code: GPS008
NW SW or Govt Lot # | Section: 28 | Township: 8 N | Range: 19 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 HOME
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.) |
|---|---|---|
| 6 | Surface | 241 |

| Upper Enlarged Drillhole | | Lower Open Bedrock |
|---|---|---|
| No | Rotary - Mud Circulation ..... | No |
| No | Rotary - Air ..... | Yes |
| No | Rotary - Air & Foam ..... | No |
| Yes | 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.) |
|---|---|---|---|---|---|---|
| | | X | Z | X-SAND & CLAY Z-W/COBBLES/BOULDERS | Surface | 61 |
| | | Z | S | Z-CLAY & GRAVEL S-SANDY | 61 | 96 |
| U | | C | | U-BLUE C-CLAY | 96 | 108 |
| | | Z | Z | Z-CLAY & GRAVEL Z-W/COBBLES/BOULDERS | 108 | 124 |
| | | L | | L-LIMESTONE/DOLOMITE | 124 | 241 |

**6. Casing, Liner, Screen**

| Dia. (in.) | Material, Weight, Specification Manufacturer & Method of Assembly | From (ft.) | To (ft.) |
|---|---|---|---|
| 6 | 18.97#/FT ASTM A53B WHEATLAND WELDED | Surface | 124 |

| Dia. (in.) | Screen type, material & slot size | From (ft.) | To (ft.) |
|---|---|---|---|
| | | | |

**9. Static Water Level**
137 ft. below ground surface

**10. Pump Test**
Pumping level 180 ft. below surface
Pumping at 30 GP M for 2 Hrs.
Pumping Method ? Airlift

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

**7. Grout or Other Sealing Material**
Method MOUNDED

| Kind of Sealing Material | From (ft.) | To (ft.) | # Sacks Cement |
|---|---|---|---|
| GRANULAR BENTONITE | Surface | | |

**12.** Notified Owner of need to fill & seal ? No
Filled & Sealed Well(s) as needed? No

| **13.** Constructor / Supervisory Driller | Lic # | Date Signed |
|---|---|---|
| KS | 583 | 04-29-2026 |
| **Drill Rig Operator** | **Lic or Reg #** | **Date Signed** |
| MW | | 04-29-2026 |

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

| Type | Qualifier | Distance | Type | Qualifier | Distance |
|---|---|---|---|---|---|
| POWTS dispersal component (soil absorption unit or mound) | | 125 | Septic or Holding, or POWTS Tank | | 108 |

Comment:

Created On: 04-29-2026 Updated On: 05-29-2026 Review Status: APPROVED