

|                                                                        |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
|------------------------------------------------------------------------|--|-------------------------------------------------|--|----------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------|--|-------------------------------------------------------------------------|--|-------------------------------------------------------------|--|---------------------------|--|----------------|--|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b> |  |                                                 |  | <b>ACM965</b>              |  | <b>Drinking Water and Groundwater - DG/5</b><br><b>Department of Natural Resources, Box 7921</b><br><b>Madison WI 53707</b>                                                                                                                                                                                                  |  |                         |  | Form 3300-077A                                                          |  |                                                             |  |                           |  |                |  |
| Property Owner ZMOLEK, KEVIN                                           |  |                                                 |  |                            |  | Phone #                                                                                                                                                                                                                                                                                                                      |  | <b>1. Well Location</b> |  |                                                                         |  | Fire # (if avail.)                                          |  |                           |  |                |  |
| Mailing Address 1114 TIMBER STONE WAY                                  |  |                                                 |  |                            |  | Town of BASS LAKE                                                                                                                                                                                                                                                                                                            |  |                         |  |                                                                         |  | 7214N                                                       |  |                           |  |                |  |
| City HUBERTUS                                                          |  |                                                 |  |                            |  | State WI                                                                                                                                                                                                                                                                                                                     |  | Zip Code 53033          |  |                                                                         |  | Street Address or Road Name and Number<br>FISHING CLUB LANE |  |                           |  |                |  |
| County                                                                 |  | Co. Permit #                                    |  | Notification #             |  | Completed                                                                                                                                                                                                                                                                                                                    |  | Subdivision Name        |  |                                                                         |  | Lot #                                                       |  | Block #                   |  |                |  |
| Sawyer                                                                 |  |                                                 |  | 10237955301                |  | 04-28-2026                                                                                                                                                                                                                                                                                                                   |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Well Constructor (Business Name)<br>BUTTERFIELD INC                    |  |                                                 |  | Lic. #<br>7115             |  | Facility ID # (Public Wells)                                                                                                                                                                                                                                                                                                 |  |                         |  | Latitude / Longitude in Decimal Degree (DD)<br>45.89807 °N -91.48313 °W |  |                                                             |  | Method Code<br>GPS008     |  |                |  |
| Address 14346 W ST RD 77<br>HAYWARD WI 54843-9790                      |  |                                                 |  | Well Plan Approval #       |  |                                                                                                                                                                                                                                                                                                                              |  | NE NE                   |  | Section 4                                                               |  | Township 39 N                                               |  | Range 9 W                 |  |                |  |
|                                                                        |  |                                                 |  | Approval Date (mm-dd-yyyy) |  |                                                                                                                                                                                                                                                                                                                              |  | or Govt Lot # 1         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Hicap Permanent Well #                                                 |  |                                                 |  | Common Well #              |  | Specific Capacity<br>0                                                                                                                                                                                                                                                                                                       |  |                         |  | <b>2. Well Type</b> New Well                                            |  |                                                             |  | of previous unique well # |  | constructed in |  |
| Heat Exchange ___ # of drillholes                                      |  |                                                 |  | Hicap Well ? No            |  | Hicap Property ? No                                                                                                                                                                                                                                                                                                          |  |                         |  | Reason for replaced or reconstructed well ?                             |  |                                                             |  | Construction Type Drilled |  |                |  |
| Private, potable                                                       |  |                                                 |  | Hicap Potable ? No         |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| <b>3. Well serves</b> 1 # of HOME                                      |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| <b>4. Potential Contamination Sources - ON REVERSE SIDE</b>            |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| <b>5. Drillhole Dimensions and Construction Method</b>                 |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Dia. (in.)                                                             |  | From (ft.)                                      |  | To (ft.)                   |  | Upper Enlarged Drillhole                                                                                                                                                                                                                                                                                                     |  |                         |  | Lower Open Bedrock                                                      |  |                                                             |  |                           |  |                |  |
| 8.75                                                                   |  | Surface                                         |  | 64                         |  | Yes Rotary - Mud Circulation ..... No<br>No Rotary - Air ..... No<br>No Rotary - Air & Foam ..... No<br>No Drill-Through Casing Hammer<br>No Reverse Rotary<br>No Cable-tool Bit ___ in. dia... No<br>No Dual Rotary ..... No<br>No Temp. Outer Casing ___ in. dia<br>No Removed? ___ depth ft. (If NO explain on back side) |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| <b>8. Geology</b>                                                      |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Geology Codes                                                          |  | Type, Caving/Noncaving, Color, Hardness, etc... |  | From (ft.)                 |  | To (ft.)                                                                                                                                                                                                                                                                                                                     |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Y                                                                      |  | Y-SAND & GRAVEL                                 |  | Surface                    |  | 4                                                                                                                                                                                                                                                                                                                            |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Z M                                                                    |  | Z-CLAY & GRAVEL M-SILTY                         |  | 4                          |  | 12                                                                                                                                                                                                                                                                                                                           |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| A Y                                                                    |  | A-COARSE Y-SAND & GRAVEL                        |  | 12                         |  | 64                                                                                                                                                                                                                                                                                                                           |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| <b>6. Casing, Liner, Screen</b>                                        |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Dia. (in.)                                                             |  | Material, Weight, Specification                 |  | From (ft.)                 |  | To (ft.)                                                                                                                                                                                                                                                                                                                     |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| 5                                                                      |  | NAS PVC SDR17 250PSI ASTM F480                  |  | Surface                    |  | 58                                                                                                                                                                                                                                                                                                                           |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Dia. (in.)                                                             |  | Screen type, material & slot size               |  | From (ft.)                 |  | To (ft.)                                                                                                                                                                                                                                                                                                                     |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| 3                                                                      |  | 10 CONTINUOUS SLOT STAINLESS STEEL              |  | 58                         |  | 64                                                                                                                                                                                                                                                                                                                           |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| <b>7. Grout or Other Sealing Material</b>                              |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Method TREMIE PIPE - PUMPED                                            |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Kind of Sealing Material                                               |  | From (ft.)                                      |  | To (ft.)                   |  | # Sacks Cement                                                                                                                                                                                                                                                                                                               |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| TD-16 BENTONITE GROUT                                                  |  | Surface                                         |  | 55                         |  | 4 S                                                                                                                                                                                                                                                                                                                          |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| <b>9. Static Water Level</b>                                           |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| 19 ft. below ground surface                                            |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| <b>10. Pump Test</b>                                                   |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Pumping level 36 ft. below surface                                     |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Pumping at 10 GP M for 1 Hrs.                                          |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Pumping Method ? Test Pump                                             |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| <b>11. Well Is</b>                                                     |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| 14 in. above grade                                                     |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Developed ? Yes                                                        |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Disinfected ? Yes                                                      |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Capped ? Yes                                                           |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| <b>12. Notified Owner of need to fill &amp; seal ?</b> No              |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Filled & Sealed Well(s) as needed? No                                  |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| <b>13. Constructor / Supervisory Driller</b>                           |  |                                                 |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Lic #                                                                  |  | Date Signed                                     |  |                            |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| TAB                                                                    |  | 6349                                            |  | 04-29-2026                 |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| Drill Rig Operator                                                     |  | Lic or Reg #                                    |  | Date Signed                |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |
| JSM                                                                    |  | 7418                                            |  | 04-29-2026                 |  |                                                                                                                                                                                                                                                                                                                              |  |                         |  |                                                                         |  |                                                             |  |                           |  |                |  |

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

| Type                                                                | Qualifier | Distance | Type                             | Qualifier | Distance |
|---------------------------------------------------------------------|-----------|----------|----------------------------------|-----------|----------|
| Lake, Stream, River or Pond (Including Storm Water Detention Basin) | >         | 200      | Septic or Holding, or POWTS Tank | =         | 50       |

Comment:

Created On: 04-29-2026

Updated On: 05-29-2026

Review Status: APPROVED