# Well Construction Report
## *WISCONSIN UNIQUE WELL NUMBER* ACN013

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

| | |
|---|---|
| Property Owner: ORLEY MARY | Phone # |
| Mailing Address: S67 W13786 FLEETWOOD RD | |
| City: MUSKEGO | State: WI — Zip Code: 53150 |
| County: Waukesha | Co. Permit #: — Notification #: 10233466701 — Completed: 04-28-2026 |

**1. Well Location**
City of MUSKEGO
Fire # (if avail.)
Street Address or Road Name and Number: S67 W13786 FLEETWOOD RD
Subdivision Name | Lot # | Block #

| | |
|---|---|
| Well Constructor (Business Name): SWEENEY, KENNETH R | Lic. #: 583 |
| Address: KEN SWEENEY WELL DRILLING & PUMPS 11221 W ST MARTINS RD FRANKLIN WI 53132-2331 | |
| Hicap Permanent Well # | Common Well # |
| Facility ID # (Public Wells) | |
| Well Plan Approval # | |
| Approval Date (mm-dd-yyyy) | |
| Specific Capacity: 1.8 | |

Latitude / Longitude in Decimal Degree (DD): 42.9223 °N -88.0867 °W — Method Code: GPS008

NW SW or Govt Lot # | Section: 1 | Township: 5 N | Range: 20 E

**2. Well Type** Replacement
of previous unique well # — constructed in
Reason for replaced or reconstructed well ?: ROTTEN CASING
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 | 79 |

| Upper Enlarged Drillhole | | Lower Open Bedrock |
|---|---|---|
| No | Rotary - Mud Circulation ..... | No |
| No | Rotary - Air ..... | No |
| 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.) |
|---|---|---|---|---|---|---|
| T | | C | | T-TAN/BROWN C-CLAY | Surface | 12 |
| U | | C | | U-BLUE C-CLAY | 12 | 36 |
| | | Y | | Y-SAND & GRAVEL | 36 | 58 |
| U | | C | | U-BLUE C-CLAY | 58 | 74 |
| | | G | | G-GRAVEL/STONES | 74 | 79 |

**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 | 79 |
| Dia. (in.) | Screen type, material & slot size | From (ft.) | To (ft.) |
| | | | |

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

**10. Pump Test**
Pumping level 60 ft. below surface
Pumping at 50 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 ? Yes
Filled & Sealed Well(s) as needed? Yes

| **13.** Constructor / Supervisory Driller | Lic # | Date Signed |
|---|---|---|
| KS | 583 | 05-01-2026 |
| Drill Rig Operator | Lic or Reg # | Date Signed |
| MW | 7359 | 05-01-2026 |

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

| Type | Qualifier | Distance | Type | Qualifier | Distance |
|---|---|---|---|---|---|
| Sewer - Collector - Sanitary | | 68 | Sewer - Building Sanitary | | 9 |

Comment:

Created On: 05-01-2026 Updated On: 06-01-2026 Review Status: APPROVED