

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				ACN140		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A									
Property Owner PRAHL, TODD						Phone #		1. Well Location				Fire # (if avail.)							
Mailing Address 15245 TELLIER						Town of RIVERVIEW						15245							
City CRIVITZ						State WI		Zip Code 54114				Street Address or Road Name and Number TELLIER							
County Oconto		Co. Permit # 1		Notification # 10248521301		Completed 04-30-2026		Subdivision Name				Lot # Block #							
Well Constructor (Business Name) VAN DE YACHT LEO WELL DRILLING INC				Lic. # 6097		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD) 45.2289 °N -88.3683 °W				Method Code GPS008					
Address 1267 LAKEVIEW DR GREEN BAY WI 54313				Well Plan Approval #		NW NW		Section 27		Township 32 N		Range 17 E							
				Approval Date (mm-dd-yyyy)		or Govt Lot #													
Hicap Permanent Well #		Common Well #		Specific Capacity 1		2. Well Type Replacement				of previous unique well # constructed in									
3. Well serves 1 # of HOME				Hicap Well ? No		Reason for replaced or reconstructed well ?				SANDPOINT									
Private, potable				Hicap Property ? No		Construction Type Drilled													
Heat Exchange ___ # of drillholes				Hicap Potable ? No															
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		33		No Rotary - Mud Circulation		No		S M		S-SAND M-SILTY		Surface		28			
						No Rotary - Air		Yes		S		S-SAND		28		30			
						No Rotary - Air & Foam		No		G		G-GRAVEL/STONES		30		33			
						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)													
6. Casing, Liner, Screen												9. Static Water Level				11. Well Is			
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		13 ft. below ground surface				24 in. above grade					
6		NEW BLACK STEEL PLAIN END WELDED ASTM A 53B 18 97# PER FT NUCOR PIPE				Surface		33		10. Pump Test				Developed ? Yes					
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping level 28 ft. below surface				Disinfected ? Yes					
										Pumping at 15 GP M for 2 Hrs.				Capped ? Yes					
										Pumping Method ? Airlift									
7. Grout or Other Sealing Material												12. Notified Owner of need to fill & seal ? Yes							
Method MOUNDED												Filled & Sealed Well(s) as needed? Yes TO BE DONE BY PUMP INSTALLER							
Kind of Sealing Material		From (ft.)		To (ft.)		# Sacks Cement													
BEN SEAL		Surface		33		2 S													
13. Constructor / Supervisory Driller												Lic #		Date Signed					
TLV												6378		05-05-2026					
Drill Rig Operator												Lic or Reg #		Date Signed					
KZ												7365		05-05-2026					

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)	=	58	Septic or Holding, or POWTS Tank	=	40

Comment: OPEN BOTTOM GRAVEL WELL**Created On:** 05-05-2026**Updated On:** 05-27-2026**Review Status:** APPROVED