Well Construction Report
WISCONSIN UNIQUE WELL NUMBER AV498

Drinking Water and Groundwater - DG/5
Department of Natural Resources, Box 7921
Madison WI 53707

Form 3300-077A

Property Owner: GLORIA OLSON			Phone #: (512)349-3828
Mailing Address: 4465 MANILOO			
City: OKEMOS	State: MI	Zip Code: 48864	
County: Barron	Co. Permit #:	Notification #:	Completed: 05-06-1992

1. Well Location

Town of CUMBERLAND

Fire # (if avail.)

Street Address or Road Name and Number

Subdivision Name	Lot #	Block #

Well Constructor (Business Name)	Lic. #	Facility ID # (Public Wells)
BEECROFT, CLARENCE	426	

Latitude / Longitude in Decimal Degree (DD): °N °W

Method Code

Address: RT 2 BOX 137, FREDERIC WI 54837

Well Plan Approval #

Approval Date (mm-dd-yyyy)

SW	NW	Section	Township	Range
or Govt Lot #		2	35 N	13 W

2. Well Type New Well

of previous unique well # constructed in

Reason for replaced or reconstructed well ?

PUMPING SAND

Hicap Permanent Well #	Common Well #	Specific Capacity
		2

3. Well serves 1 # of

Private,potable

Heat Exchange____# of drillholes

Hicap Well ? No

Hicap Property ? No

Hicap Potable ?

Construction Type: Drilled

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
4	Surface	90

Upper Enlarged Drillhole / Lower Open Bedrock

- Rotary - Mud Circulation .....
- Rotary - Air .....
- Rotary - Air & Foam .....
- Drill-Through Casing Hammer
- Reverse Rotary
- Yes — Cable-tool Bit 4in. dia...
- Dual Rotary .....
- Temp. Outer Casing ____in. dia
  Removed? ____depth ft. (If NO explain on back side)

8. Geology

Geology Codes	Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
P	HARD PAN	Surface	6
S	SAND	6	90

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
4	NEW BLK STEEL ASTM 589 10.79 WELD SAWHILL U.S.A.	Surface	87
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)
4	S STEEL	87	90

9. Static Water Level

70 ft. below ground surface

10. Pump Test

Pumping level 75 ft. below surface

Pumping at 10 GP for 1 Hrs.

Pumping Method ?

11. Well Is

12 in. above grade

Developed ? Yes

Disinfected ? Yes

Capped ? Yes

7. Grout or Other Sealing Material

Method

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
VAL CLAY CRUMBLES	Surface	0	

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? Yes

13. Constructor / Supervisory Driller	Lic #	Date Signed
CB		06-10-1992
Drill Rig Operator	Lic or Reg #	Date Signed
CB		06-10-1992

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Overhang		15	Septic or Holding, or POWTS Tank		90

Comment:

Created On: 06-24-1992 Updated On: 06-24-1992 Review Status: