

|                                                                        |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
|------------------------------------------------------------------------|--|----------------------------------------------------------------------|--|-------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------|--|-----------------------|-------|--------------------|---------|--|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b> |  |                                                                      |  | <b>BF522</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 MADISON, CITY OF                                        |  |                                                                      |  |                                                 |  | Phone # (608)266-4656                                                                                                       |  | <b>1. Well Location</b>                     |  |                       |       | Fire # (if avail.) |         |  |
| Mailing Address 523 E MAIN ST                                          |  |                                                                      |  |                                                 |  | City of MADISON                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| City MADISON                                                           |  |                                                                      |  | State WI                                        |  | Zip Code 53703                                                                                                              |  |                                             |  |                       |       |                    |         |  |
| County Dane                                                            |  | Co. Permit #                                                         |  | Notification #                                  |  | Completed 08-01-1958                                                                                                        |  | Subdivision Name                            |  |                       | Lot # |                    | Block # |  |
| Well Constructor (Business Name)<br>LAYNE CHRISTENSEN COMPANY          |  |                                                                      |  | Lic. # 582                                      |  | Facility ID # (Public Wells)<br>113022470                                                                                   |  |                                             |  | Method Code<br>GPS008 |       |                    |         |  |
| Address W229 N5005 DUPLAINVI<br>PEWAUKEE WI 53072                      |  |                                                                      |  | Well Plan Approval #<br>56-0228                 |  | or Govt Lot #                                                                                                               |  | Section 10                                  |  | Township 7 N          |       | Range 10 E         |         |  |
|                                                                        |  |                                                                      |  | Approval Date (mm-dd-yyyy)<br>06-29-1956        |  | <b>2. Well Type</b> New Well                                                                                                |  |                                             |  |                       |       |                    |         |  |
| Hicap Permanent Well #<br>77142                                        |  |                                                                      |  | Common Well #<br>023                            |  | Specific Capacity<br>16.7                                                                                                   |  | Reason for replaced or reconstructed well ? |  |                       |       |                    |         |  |
| <b>3. Well serves</b> # of<br>Municipal/Community                      |  |                                                                      |  | Hicap Well ? No                                 |  |                                                                                                                             |  | Construction Type Drilled                   |  |                       |       |                    |         |  |
| Heat Exchange # of drillholes                                          |  |                                                                      |  | Hicap Property ? No                             |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| Hicap Potable ? No                                                     |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| <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    |       |                    |         |  |
| 18                                                                     |  | Surface                                                              |  | 104                                             |  | No Rotary - Mud Circulation .....                                                                                           |  |                                             |  | No                    |       |                    |         |  |
| 12                                                                     |  | 104                                                                  |  | 500                                             |  | No Rotary - Air .....                                                                                                       |  |                                             |  | No                    |       |                    |         |  |
|                                                                        |  |                                                                      |  |                                                 |  | No Rotary - Air & Foam .....                                                                                                |  |                                             |  | No                    |       |                    |         |  |
|                                                                        |  |                                                                      |  |                                                 |  | No 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)                                                                     |  |                                             |  |                       |       |                    |         |  |
| <b>8. Geology</b>                                                      |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| Geology Codes                                                          |  |                                                                      |  | Type, Caving/Noncaving, Color, Hardness, etc... |  |                                                                                                                             |  | From (ft.)                                  |  | To (ft.)              |       |                    |         |  |
| T                                                                      |  | L                                                                    |  | TILL                                            |  |                                                                                                                             |  | Surface                                     |  | 70                    |       |                    |         |  |
| P                                                                      |  | L S                                                                  |  | DOLOMITE-TREMPEALEAU                            |  |                                                                                                                             |  | 70                                          |  | 75                    |       |                    |         |  |
| H                                                                      |  | N M                                                                  |  | SILTSTONE-FRANCONIAN                            |  |                                                                                                                             |  | 75                                          |  | 95                    |       |                    |         |  |
| N                                                                      |  | N L                                                                  |  | SANDSTONE-FRANCONIAN                            |  |                                                                                                                             |  | 95                                          |  | 190                   |       |                    |         |  |
|                                                                        |  | N                                                                    |  | SANDSTONE-GALESVILLE                            |  |                                                                                                                             |  | 190                                         |  | 285                   |       |                    |         |  |
| E                                                                      |  | H S                                                                  |  | SHALE-EAU CLAIRE-MT SIMON                       |  |                                                                                                                             |  | 285                                         |  | 290                   |       |                    |         |  |
|                                                                        |  | N                                                                    |  | SANDSTONE-EAU CLAIRE-MT SIMON                   |  |                                                                                                                             |  | 290                                         |  | 500                   |       |                    |         |  |
| <b>6. Casing, Liner, Screen</b>                                        |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| Dia. (in.)                                                             |  | Material, Weight, Specification<br>Manufacturer & Method of Assembly |  |                                                 |  | From (ft.)                                                                                                                  |  | To (ft.)                                    |  |                       |       |                    |         |  |
| 18                                                                     |  |                                                                      |  |                                                 |  | Surface                                                                                                                     |  | 66                                          |  |                       |       |                    |         |  |
| 12                                                                     |  |                                                                      |  |                                                 |  | 0                                                                                                                           |  | 104                                         |  |                       |       |                    |         |  |
| Dia. (in.)                                                             |  | Screen type, material & slot size                                    |  |                                                 |  | From (ft.)                                                                                                                  |  | To (ft.)                                    |  |                       |       |                    |         |  |
|                                                                        |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| <b>7. Grout or Other Sealing Material</b>                              |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| Method                                                                 |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| Kind of Sealing Material                                               |  |                                                                      |  | From (ft.)                                      |  | To (ft.)                                                                                                                    |  | # Sacks Cement                              |  |                       |       |                    |         |  |
| CEMENT                                                                 |  |                                                                      |  | Surface                                         |  | 102                                                                                                                         |  |                                             |  |                       |       |                    |         |  |
| <b>9. Static Water Level</b>                                           |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| 46 ft. below ground surface                                            |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| <b>10. Pump Test</b>                                                   |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| Pumping level 105.9 ft. below surface                                  |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| Pumping at 1001 GP M for 105 Hrs.                                      |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| Pumping Method ?                                                       |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| <b>11. Well Is</b>                                                     |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| 0 in. ____ grade                                                       |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| Developed ? No                                                         |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| Disinfected ? No                                                       |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| Capped ? No                                                            |  |                                                                      |  |                                                 |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| <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                                     |  |                                                                                                                             |  |                                             |  |                       |       |                    |         |  |
| Drill Rig Operator                                                     |  |                                                                      |  | Lic or Reg #                                    |  |                                                                                                                             |  | Date Signed                                 |  |                       |       |                    |         |  |

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

Comment:

| Abandonment Type | Abandonment Date | Procedure                                                                                                                         | Reason           |
|------------------|------------------|-----------------------------------------------------------------------------------------------------------------------------------|------------------|
|                  | 07/08/2021       | BENTONITE CHIPS 0-302FT (344 BAGS)<br>PEA STONE 302-360 (11 YARDS). WELL<br>BLASTED EVERY 3' FROM 169-211 AND<br>EVERY 2' 214-500 | NO LONGER IN USE |

Created On: 01-05-1999

Updated On: 08-05-2021

Review Status: