

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				CG298		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A			
Property Owner JEFF KEGLY					Phone #		1. Well Location				Fire # (if avail.)		
Mailing Address MONTGOMERY LAKE RD							Town of FLORENCE						
City SPREAD EAGLE					State WI		Zip Code 54121						
County Florence		Co. Permit #		Notification #		Completed 12-13-1990		Street Address or Road Name and Number MONTGOMERY LAKE RD					
							Subdivision Name				Lot #		
											Block #		
Well Constructor (Business Name) KLEIMAN PUMP AND WELLDRIILLING IN					Lic. # 575		Facility ID # (Public Wells)		Latitude / Longitude in Decimal Degree (DD) °N °W				
Address P O BOX 704 IRON MOUNTAIN MI 49801					Well Plan Approval #		Approval Date (mm-dd-yyyy)		SE NE		Section Township Range		
									or Govt Lot # 31		40 N 19 E		
Hicap Permanent Well #					Common Well #		Specific Capacity 0.4		2. Well Type New Well				
									of previous unique well # constructed in				
									Reason for replaced or reconstructed well ?				
3. Well serves 1 # of					Hicap Well ? No								
Private, potable					Hicap Property ? No								
Heat Exchange ___ # of drillholes					Hicap Potable ?				Construction Type Drilled				
4. Potential Contamination Sources - ON REVERSE SIDE													
5. Drillhole Dimensions and Construction Method													
Dia. (in.)		From (ft.)		To (ft.)		Upper Enlarged Drillhole			Lower Open Bedrock				
6		Surface		102									
						Rotary - Mud Circulation							
						Rotary - Air							
						Rotary - Air & Foam							
						Drill-Through Casing Hammer							
						Reverse Rotary							
						Cable-tool Bit ___ in. 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.)				
Q S G			SAND @ GRAVEL, CAVING, CLEAN BROWN			Surface			40				
S Q			SOFT, BROKEN BLACK SLATEROCK, CAVING			10			70				
Q S			SAND, CAVING, BROWN, CLEAN			40			60				
H Q			FIRM, BLACK, SLATE ROCK			70			102				
6. Casing, Liner, Screen													
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)					
6		BLACK STEEL A53 18.97#PER FL P.E.				Surface		73					
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)					
7. Grout or Other Sealing Material													
Method													
9. Static Water Level													
54 ft. below ground surface													
10. Pump Test													
Pumping level 100 ft. below surface													
Pumping at 20 GP for 1 Hrs.													
Pumping Method ?													
11. Well Is													
22 in. above grade													
Developed ? Yes													
Disinfected ? Yes													
Capped ? Yes													
12. Notified Owner of need to fill & seal ?													
Filled & Sealed Well(s) as needed?													
13. Constructor / Supervisory Driller													
HPK								Lic #		Date Signed			
										03-04-1991			
Drill Rig Operator													
DN								Lic or Reg #		Date Signed			
										12-14-1990			

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Overhang		20	Landfill		2500

Comment:

Created On: 07-15-1991

Updated On: 07-15-1991

Review Status: