Well Construction Report
WISCONSIN UNIQUE WELL NUMBER CH898

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

Form 3300-077A

Property Owner: JIM NICHOLS			Phone #
Mailing Address: 3130 LOGTOWN RD			
City: OCONTO	State: WI	Zip Code: 54153	
County: Oconto	Co. Permit #	Notification #	Completed: 04-20-1992

Well Constructor (Business Name): JOHNSON, GREGORY L	Lic. #: 625	Facility ID # (Public Wells)	
Address: N3719 LOUCKS RD PESHTIGO WI 54157-9750		Well Plan Approval #	
		Approval Date (mm-dd-yyyy)	
Hicap Permanent Well #	Common Well #	Specific Capacity: 1	

3. Well serves 1 # of
Private,potable
Heat Exchange____# of drillholes

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

1. Well Location
Town of OCONTO

Fire # (if avail.): 3130

Street Address or Road Name and Number: 3130 LOGTOWN RD

Subdivision Name	Lot #	Block #

Latitude / Longitude in Decimal Degree (DD): 44.9085 °N -87.9197 °W
Method Code: GCD013

SE	SW	Section	Township	Range
or Govt Lot #		11	28 N	21 E

2. Well Type New Well
of previous unique well # constructed in

Reason for replaced or reconstructed well ?

Construction Type: Drilled

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
10	Surface	15
8	15	41
6	41	100

Upper Enlarged Drillhole / Lower Open Bedrock

Rotary - Mud Circulation .....
Rotary - Air .....
Rotary - Air & Foam .....
Drill-Through Casing Hammer
Reverse Rotary
Yes Cable-tool Bit 8in. dia...
Dual Rotary .....
Yes Temp. Outer Casing 8in. dia
Yes Removed? ____depth ft. (If NO explain on back side)

8. Geology

Geology Codes	Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
C	CLAY	Surface	15
L	LIME ROCK	15	60
N	SAND STONE	60	95
H	SHALE	95	100

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	ASTM-53-A V.S.P. CO. 1780 P.S.I. PLAIN END	Surface	42
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)

7. Grout or Other Sealing Material

Method PUMP IN

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
PUDDLED CLAY	Surface	7	
CEMENT	7	41	12

9. Static Water Level
15 ft. below ground surface

10. Pump Test
Pumping level 25 ft. below surface
Pumping at 10 GP for 15 Hrs.
Pumping Method ?

11. Well Is
0 in. _____ grade
Developed ?
Disinfected ?
Capped ?

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed?

13. Constructor / Supervisory Driller	Lic #	Date Signed
Drill Rig Operator	**Lic or Reg #**	**Date Signed**

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		65	Sewer - Building Sanitary		50
Building Overhang		14	Septic or Holding, or POWTS Tank		50

Comment:

Created On: 06-24-1992 Updated On: 11-15-2019 Review Status: