Well Construction Report
WISCONSIN UNIQUE WELL NUMBER CM474

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

Form 3300-077A

Property Owner: WALLY TRALEWSKI			Phone #
Mailing Address: 8548 OLEANDER			
City: NILES	State: IL	Zip Code: 60648	
County: Adams	Co. Permit #	Notification #	Completed: 11-12-1990

Well Constructor (Business Name): BAUMEL SEPTIC AND WELL SERVICE	Lic. #: 4682	Facility ID # (Public Wells)	
Address: 1335 DUCK CREEK CT ADAMS WI 53910		Well Plan Approval #	
		Approval Date (mm-dd-yyyy)	
Hicap Permanent Well #	Common Well #	Specific Capacity	

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

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

1. Well Location
Town of ADAMS

Fire # (if avail.)

Street Address or Road Name and Number
15TH CT

Subdivision Name	Lot #	Block #
BREWSTER HARRIS	00074	

Latitude / Longitude in Decimal Degree (DD) °N °W — Method Code

SW NE or Govt Lot #	Section	Township	Range
	23	17 N	5 E

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

Reason for replaced or reconstructed well ?

Construction Type Jetted

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Upper Enlarged Drillhole / Lower Open Bedrock

- 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

6. Casing, Liner, Screen — Removed? ____depth ft. (If NO explain on back side)

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
2	STEEL	Surface	42
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)
1.25	JOHNSON	42	45

7. Grout or Other Sealing Material
Method

8. Geology

Geology Codes				Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
		S		SAND	Surface	24
		C		CLAY	24	26
		S	G	SAND @ GRAVEL	26	45

9. Static Water Level
6 ft. below ground surface

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

11. Well Is
24 in. above grade
Developed ? Yes
Disinfected ? Yes
Capped ? Yes

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? Yes

13. Constructor / Supervisory Driller	Lic #	Date Signed
DJ		11-12-1990
Drill Rig Operator	Lic or Reg #	Date Signed
MB		11-12-1990

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)	>	50	Septic or Holding, or POWTS Tank	>	25

Comment:

Abandonment Type	Abandonment Date	Procedure	Reason
	12/19/2003	NEAT CEMENT 0-66; 1 SACK USED	NEW WELL INSTALLED

Created On: 07-16-1991 Updated On: 07-11-2023 Review Status: