Well Construction Report
WISCONSIN UNIQUE WELL NUMBER CN510

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

Form 3300-077A

Property Owner: GREG VOLE			Phone #
Mailing Address: 42940 HWY 45			
City: ANTIOCH	State: IL	Zip Code: 60002	
County: Columbia	Co. Permit #	Notification #	Completed: 10-19-1991

Well Constructor (Business Name): MARVIN HOLZEM	Lic. #: 637	Facility ID # (Public Wells)	
Address: N9899 HWY 23 WISCONSIN DELLS WI 53965		Well Plan Approval #	
		Approval Date (mm-dd-yyyy)	
Hicap Permanent Well #	Common Well #	Specific Capacity: 10	

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

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

1. Well Location

Town of CALEDONIA

Fire # (if avail.): 10040

Street Address or Road Name and Number: CASCADE MT

Subdivision Name	Lot #	Block #

Latitude / Longitude in Decimal Degree (DD)	Method Code
43.4991 °N -89.4999 °W	GCD013

NE SE or Govt Lot #	Section	Township	Range
	23	12 N	8 E

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

Reason for replaced or reconstructed well ?
REPLACE 2" POINT

Construction Type: Drilled

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
6	Surface	100

Upper Enlarged Drillhole / Lower Open Bedrock

Yes Rotary - Air .....
Rotary - Mud Circulation .....
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.)
		S		SAND	Surface	12
		P		HARDPAN	12	36
	S	N		SOFT SANDSTONE	36	64
		N		SANDSTONE	64	100

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	P.E. NEW PIPE ASTM A53 280 W 18.97LB W.T. CO ILL	Surface	63
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)

9. Static Water Level
14 ft. below ground surface

10. Pump Test
Pumping level 16 ft. below surface
Pumping at 20 GP for 2 Hrs.
Pumping Method ?

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

7. Grout or Other Sealing Material
Method

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed?
OWNER

13. Constructor / Supervisory Driller	Lic #	Date Signed
Drill Rig Operator	Lic or Reg #	Date Signed
MH		11-05-1991

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)		60	Sewer - Building Sanitary		25
Building Overhang		16	Septic or Holding, or POWTS Tank		34

Comment:

Created On: 01-03-1992 Updated On: 12-16-2020 Review Status: