

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				CN531		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A							
Property Owner POST, FERN					Phone # (608)437-3168			1. Well Location				Fire # (if avail.)					
Mailing Address 307 GREEN ST					Town of WEST POINT					13676							
City MT HOREB					State WI		Zip Code 53572					Street Address or Road Name and Number W13676 RAUSCH LN					
County Columbia		Co. Permit #		Notification #			Completed 06-10-1994			Subdivision Name			Lot #		Block #		
Well Constructor (Business Name) WICKHAMS WATER SERVICE INC				Lic. # 4540		Facility ID # (Public Wells)			Latitude / Longitude in Decimal Degree (DD)				Method Code				
Address W10558 HWY J LODI WI 53555				Well Plan Approval #			SW NW		Section 9		Township 10 N		Range 7 E				
Hicap Permanent Well #				Common Well #		Specific Capacity			2. Well Type Reconstruction				of previous unique well # CN531 constructed in 94				
Heat Exchange ___ # of drillholes				Hicap Well ? No			Hicap Property ? No			Reason for replaced or reconstructed well ? OLD POINT PLUGED							
3. Well serves 1 # of Private, potable				Hicap Potable ?			Construction Type Driven Point			4. Potential Contamination Sources - ON REVERSE SIDE							
5. Drillhole Dimensions and Construction Method														8. Geology			
Dia. (in.)		From (ft.)		To (ft.)		Upper Enlarged Drillhole				Lower Open Bedrock							
1.25		Surface		29		Rotary - Mud Circulation Rotary - Air Rotary - Air & Foam Drill-Through Casing Hammer Reverse Rotary Cable-tool Bit ___ in. dia... Dual Rotary											
6. Casing, Liner, Screen						Temp. Outer Casing ___ in. dia Removed? ___ depth ft. (If NO				9. Static Water Level				11. Well Is			
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		15 ft. below ground surface				12 in. above grade			
1.25		GALV. STEEL PIPE A53				Surface		25		10. Pump Test				Developed ? Yes			
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping level ___ ft. below surface				Disinfected ? Yes			
1.25		JOHNSON STAINLESS 10 SLOT				25		29		Pumping at 6 GP M for 2 Hrs.				Capped ? Yes			
7. Grout or Other Sealing Material						Method				Pumping Method ?							
12. Notified Owner of need to fill & seal ?																	
Filled & Sealed Well(s) as needed?														No			
NONE PRESENT																	
13. Constructor / Supervisory Driller								Lic #		Date Signed							
MMW										06-10-1994							
Drill Rig Operator								Lic or Reg #		Date Signed							

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		75	Shoreline/Pool		90
			Septic or Holding, or POWTS Tank		80

Comment:

Created On: 10-07-1994

Updated On: 10-07-1994

Review Status: