

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				CW319		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A					
Property Owner MIKE BLONIAZ						Phone # (414)388-0805		1. Well Location				Fire # (if avail.)			
Mailing Address CHURCH RD						Town of CASCO						Street Address or Road Name and Number CHURCH RD			
City KEWAUNEE				State WI		Zip Code 54216		Subdivision Name				Lot #		Block #	
County Kewaunee		Co. Permit #		Notification #		Completed 11-21-1989		Latitude / Longitude in Decimal Degree (DD) 44.53122 °N -87.53487 °W				Method Code GCD001			
Well Constructor (Business Name) EUCLIDE HAROLD A				Lic. # 630		Facility ID # (Public Wells)		SE SW		Section 24		Township 24 N		Range 24 E	
Address RT 1 2057 COUNTY RD BRUSSELS WI 54204				Well Plan Approval #		Approval Date (mm-dd-yyyy)		2. Well Type New Well				of previous unique well #		constructed in	
Hicap Permanent Well #				Common Well #		Specific Capacity 0.2		Reason for replaced or reconstructed well ?				Construction Type Drilled			
3. Well serves 1 # of Private, potable						Hicap Well ? No		Hicap Property ? No							
Heat Exchange ___ # of drillholes						Hicap Potable ?		Reason for replaced or reconstructed well ?							
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												
8 Surface 169			Yes Rotary - Mud Circulation												
6 169 220			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.)				
C G			CLAY AND GRAVEL						Surface		167				
L			LIME ROCK						167		220				
6. Casing, Liner, Screen															
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)							
6		NEW BLACK STEEL PE WT 18.97 A-53 API-5L				Surface		169							
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)							
7. Grout or Other Sealing Material															
Method PRESSURE															
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement							
MUD				Surface		129									
CEMENT				129		169		6							
9. Static Water Level															
15 ft. below ground surface															
10. Pump Test															
Pumping level 60 ft. below surface															
Pumping at 10 GP for 3 Hrs.															
Pumping Method ?															
11. Well Is															
12 in. above grade															
Developed ? Yes															
Disinfected ? Yes															
Capped ? Yes															
12. Notified Owner of need to fill & seal ?															
Filled & Sealed Well(s) as needed? No															
13. Constructor / Supervisory Driller															
HE				Lic #		Date Signed 02-02-1990									
Drill Rig Operator				Lic or Reg #		Date Signed 02-02-1990									
WD															

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Overhang		18	Septic or Holding, or POWTS Tank		35

Comment:

Created On: 03-14-1990

Updated On: 07-12-2021

Review Status: