Well Construction Report
WISCONSIN UNIQUE WELL NUMBER CW325

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

Form 3300-077A

Property Owner: WILLIE BERKHAHN	Phone #: (414)823-2012
Mailing Address: CTY A 6658	
City: EGG HARBOR	State: WI — Zip Code: 54209
County: Door	Co. Permit #:	Notification #:	Completed: 11-06-1989
Well Constructor (Business Name): EUCLIDE HAROLD A	Lic. #: 630	Facility ID # (Public Wells):
Address: RT 1 2057 COUNTY RD BRUSSELS WI 54204	Well Plan Approval #:	Approval Date (mm-dd-yyyy):
Hicap Permanent Well #	Common Well #	Specific Capacity: 0.1

1. Well Location

Town of JACKSONPORT	Fire # (if avail.): 6658
Street Address or Road Name and Number: CTY A	
Subdivision Name	Lot #	Block #
Latitude / Longitude in Decimal Degree (DD): °N °W	Method Code

NE	NE	Section	Township	Range
or Govt Lot #		15	29 N	27 E

2. Well Type New Well

of previous unique well # constructed in

Reason for replaced or reconstructed well ?

Construction Type: Drilled

3. Well serves 1 # of

Private,potable

Heat Exchange____# of drillholes

Hicap Well ? No

Hicap Property ? No

Hicap Potable ?

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
10	Surface	18
8	18	120
6	120	220

Upper Enlarged Drillhole — Lower Open Bedrock

Yes — 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

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	18
		L		LIME ROCK	18	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 A53/API-5L	Surface	120
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)

9. Static Water Level

1 ft. below ground surface

10. Pump Test

Pumping level 100 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

7. Grout or Other Sealing Material

Method PRESSURE

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
MUD	Surface	6	
CEMENT	6	120	32

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? No

13. Constructor / Supervisory Driller	Lic #	Date Signed
HE		02-02-1990
Drill Rig Operator	Lic or Reg #	Date Signed
WD		02-02-1990

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Overhang		18	Septic or Holding, or POWTS Tank		50

Comment:

Created On: 03-14-1990 Updated On: 07-11-2023 Review Status: