Well Construction Report
WISCONSIN UNIQUE WELL NUMBER CY344

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

Form 3300-077A

Property Owner: JOSEPH E BRAUN			Phone #: (414)835-1210
Mailing Address: 4594 5 MILE RD			
City: CALEDONIA	State: WI	Zip Code: 53108	
County: Juneau	Co. Permit #:	Notification #:	Completed: 11-19-1990

Well Constructor (Business Name): RUSH ROBERT L	Lic. #: 181	Facility ID # (Public Wells):	
Address: ROUTE 4 BOX 190 BLACK RIVER FALLS WI 54615		Well Plan Approval #:	
		Approval Date (mm-dd-yyyy):	
Hicap Permanent Well #:	Common Well #:	Specific Capacity: 1.3	

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

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

1. Well Location
Town of CUTLER

Fire # (if avail.):

Street Address or Road Name and Number:

Subdivision Name:	Lot #:	Block #:	
Latitude / Longitude in Decimal Degree (DD): °N °W			Method Code:
NE SW or Govt Lot #:	Section: 18	Township: 18 N	Range: 2 E

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

Reason for replaced or reconstructed well ?
NEEDED WATER

Construction Type: Drilled

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
6	Surface	35

Upper Enlarged Drillhole — Lower Open Bedrock

- Rotary - Mud Circulation .....
- Rotary - Air .....
- Rotary - Air & Foam .....
- Drill-Through Casing Hammer
- Reverse Rotary
- Yes — Cable-tool Bit 6in. 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	35

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	BLACK PLAIN END-STEEL A 53 18.97 WELDED	Surface	33
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)
6	STAINLESS STEEL W/NEOPRENE PACKER	32	35

7. Grout or Other Sealing Material
Method

9. Static Water Level
12 ft. below ground surface

10. Pump Test
Pumping level 18 ft. below surface
Pumping at 8 GP for 6 Hrs.
Pumping Method ?

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

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed?

13. Constructor / Supervisory Driller	Lic #	Date Signed
RLR		11-27-1990
Drill Rig Operator	Lic or Reg #	Date Signed
RLR		11-27-1990

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)		58	Foundation Drain to Sewer		16
Building Drain - Sanitary		16	Sewer - Building Sanitary		18
Building Overhang		3	Septic or Holding, or POWTS Tank		30

Comment:

Created On: 04-04-1991 Updated On: 04-04-1991 Review Status: