Well Construction Report
WISCONSIN UNIQUE WELL NUMBER CZ370

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

Form 3300-077A

Property Owner: TOM @ CAROL LEYGRAAF			Phone #: (414)988-4698
Mailing Address: 193 TAYLOR ST			
City: LITTLE CHUTE	State: WI	Zip Code: 54140	
County: Forest	Co. Permit #:	Notification #:	Completed: 08-02-1990

Well Constructor (Business Name): GEIGER GERALD V	Lic. #: 5154	Facility ID # (Public Wells):	
Address: P O BOX 54 LAKEWOOD WI 54138		Well Plan Approval #:	
		Approval Date (mm-dd-yyyy):	
Hicap Permanent Well #:	Common Well #:	Specific Capacity: 0.3	

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

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

1. Well Location

Fire # (if avail.): 7056

Town of FREEDOM

Street Address or Road Name and Number: 7056 SWITZER PT RD

Subdivision Name	Lot #	Block #

Latitude / Longitude in Decimal Degree (DD)				Method Code
45.46328 °N	-88.7772 °W			GPS008
NW SE or Govt Lot #	Section: 6	Township: 34 N	Range: 14 E	

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

Reason for replaced or reconstructed well ?
NOT ENOUGH WATER

Construction Type: Driven Point

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Upper Enlarged Drillhole / Lower Open Bedrock

- 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

8. Geology

Geology Codes	Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
S	SANDY	Surface	25

6. Casing, Liner, Screen — Removed? ____depth ft. (If NO explain on back side)

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
2	R @ D STEEL	Surface	22
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
2	60 GA MIDWEST POINT	22	25

9. Static Water Level
8 ft. above ground surface

10. Pump Test
Pumping level 13 ft. below surface
Pumping at 6 GP for 2 Hrs.
Pumping Method ?

11. Well Is
12 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? No
OWNER DOING

13. Constructor / Supervisory Driller	Lic #	Date Signed
JG		08-02-1990
Drill Rig Operator	Lic or Reg #	Date Signed

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Overhang		8	Shoreline/Pool		150
			Septic or Holding, or POWTS Tank		75

Comment:

Created On: 10-23-1990 Updated On: 09-08-2022 Review Status: