Well Construction Report
WISCONSIN UNIQUE WELL NUMBER DF369

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

Form 3300-077A

Property Owner: DAVID VAUGHN	Phone #: (715)445-3447
Mailing Address: CTY B	
City: SCANDINAVIA	State: WI — Zip Code: 54977
County: Waupaca	Co. Permit #: — Notification #: — Completed: 05-06-1992
Well Constructor (Business Name): JOHNSON, MICHAEL	Lic. #: 545 — Facility ID # (Public Wells):
Address: RT 1 BOX 14A OGDENSBURG WI 54962-9704	Well Plan Approval #: — Approval Date (mm-dd-yyyy):
Hicap Permanent Well #:	Common Well #: — Specific Capacity: 4

1. Well Location

Town of SCANDINAVIA

Fire # (if avail.):

Street Address or Road Name and Number: CTY B

Subdivision Name: — Lot #: — Block #:

Latitude / Longitude in Decimal Degree (DD): °N °W — Method Code:

SE SW or Govt Lot # — Section: 12 — Township: 23 N — Range: 11 E

2. Well Type New Well

of previous unique well # — constructed in

Reason for replaced or reconstructed well ?: NEW MOBILE HOME

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.)
8	Surface	20
4	20	58

Upper Enlarged Drillhole — Lower Open Bedrock

- Rotary - Mud Circulation .....
- Rotary - Air .....
- Rotary - Air & Foam .....
- Drill-Through Casing Hammer
- Reverse Rotary
- Yes — Cable-tool Bit 8in. dia...
- Dual Rotary .....
- Yes — Temp. Outer Casing 8in. dia
- Yes — Removed? ____depth ft. (If NO explain on back side)

8. Geology

Geology Codes				Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
T		C	M	BR CLAY LOAM	Surface	5
		Y		SAND @ GRAVEL	5	12
G		C	G	GREY CLAY GRAVEL	12	25
I		S		WHITE MED TO COARSE SAND	25	58

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
4	4" NEW ASTM 589 SAWHILL T@C R@D 11 LB FT	Surface	54
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
4	12 SLOT STAINLESS STEEL JOHNSON K-PACKER	54	58

7. Grout or Other Sealing Material

Method

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
CLAY SLURRY	Surface	20	

9. Static Water Level

30 ft. below ground surface

10. Pump Test

Pumping level 34 ft. below surface

Pumping at 16 GP for 24 Hrs.

Pumping Method ?

11. Well Is

14 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
MJ		05-12-1992
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
MJ		05-12-1992

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

Type	Qualifier	Distance
Building Overhang		12

Comment:

Created On: 06-01-1992 Updated On: 06-01-1992 Review Status: