Well Construction Report
WISCONSIN UNIQUE WELL NUMBER DN315

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

Form 3300-077A

Property Owner: JOE BERAN	Phone #
Mailing Address: N3076 BOND RD	
City: LA CROSSE	State: WI — Zip Code: 54601

County	Co. Permit #	Notification #	Completed
La Crosse	W05534		12-01-1991

Well Constructor (Business Name): HOLLER, NORMAN	Lic. #: 252	Facility ID # (Public Wells)
Address: 4049 STATE RD LA CROSSE WI 54601		Well Plan Approval #
		Approval Date (mm-dd-yyyy)
Hicap Permanent Well #	Common Well #	Specific Capacity: 0.6

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

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

1. Well Location
Town of MEDBRAY

Fire # (if avail.)

Street Address or Road Name and Number: BOND RD

Subdivision Name	Lot #	Block #

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

NW or Govt Lot #	NE	Section	Township	Range
		25	16 N	7 W

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

Reason for replaced or reconstructed well ?

Construction Type: Drilled

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
8	Surface	83
6	83	215

Upper Enlarged Drillhole — Lower Open Bedrock

Rotary - Mud Circulation .....
Rotary - Air .....
Rotary - Air & Foam .....
Drill-Through Casing Hammer
Reverse Rotary
Cable-tool Bit 8in. 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	CLAY	Surface	17
H	SHALE-ROCK	17	34
N	SAND-ROCK	34	215

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	BLACK, PLAIN-END WTA USA WT 18.97 ASTM A53	Surface	84
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)

9. Static Water Level
162 ft. below ground surface

10. Pump Test
Pumping level 180 ft. below surface
Pumping at 10 GP for 10 Hrs.
Pumping Method ?

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

7. Grout or Other Sealing Material
Method MACHINE

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
CEMENT	Surface	0	20

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed?

13. Constructor / Supervisory Driller	Lic #	Date Signed
NH		12-10-1991
Drill Rig Operator	Lic or Reg #	Date Signed

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

Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		76
Building Drain - Sanitary		50

Type	Qualifier	Distance
Building Overhang		16
Sewer - Building Sanitary		56
Septic or Holding, or POWTS Tank		65

Comment:

Created On: 06-09-1992 Updated On: 06-09-1992 Review Status: