Well Construction Report
WISCONSIN UNIQUE WELL NUMBER DP920

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

Form 3300-077A

Property Owner: DAN KOMEL			Phone #: (414)728-8804
Mailing Address: RFD			
City: DELAVAN	State: WI	Zip Code: 53115	
County: Walworth	Co. Permit #:	Notification #:	Completed: 12-16-1991

Well Constructor (Business Name): HARMON FINLEY	Lic. #: 218	Facility ID # (Public Wells):	
Address: RT 1 BOX 302 WALWORTH WI 53184-9754		Well Plan Approval #:	
		Approval Date (mm-dd-yyyy):	
Hicap Permanent Well #:	Common Well #:	Specific Capacity: 2	

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

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

1. Well Location
Town of DELAVAN

Fire # (if avail.):

Street Address or Road Name and Number: MULBERRY ST

Subdivision Name: LAKE DELAVAN HIGHLANDS	Lot #: 00128	Block #:	
Latitude / Longitude in Decimal Degree (DD): °N °W			Method Code:
SW SW or Govt Lot #	Section: 32	Township: 2 N	Range: 16 E

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	6
5.56	6	103

Upper Enlarged Drillhole / Lower Open Bedrock

- Rotary - Mud Circulation .....
- Rotary - Air .....
- Rotary - Air & Foam .....
- Drill-Through Casing Hammer
- Reverse Rotary
- Yes — Cable-tool Bit 5.56in. 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.)
		X	G	CLAY, SAND, GRAVEL	Surface	14
		Y		SAND, GRAVEL	14	43
		X	G	CLAY SAND GRAVEL	43	89
		Y		SAND GRAVEL	89	107

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
5.56	ASTM A-53 15LB 5.56X.253 1950 PSI	Surface	103
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
4	JOHNSON	103	107

7. Grout or Other Sealing Material
Method

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

9. Static Water Level
1 ft. above ground surface

10. Pump Test
Pumping level 7 ft. below surface
Pumping at 12 GP for 24 Hrs.
Pumping Method ?

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

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? Yes

13. Constructor / Supervisory Driller	Lic #	Date Signed
HF		12-24-1991
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
WS		12-24-1991

4a. Potential Contamination Sources Is the well located in floodplain ?

Type	Qualifier	Distance
Collector Sewer - San or Storm		51

Comment:

Created On: 03-17-1992 Updated On: 10-15-2026 Review Status: