Well Construction Report
WISCONSIN UNIQUE WELL NUMBER DT185

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

Form 3300-077A

Property Owner: DAN JANSEN			Phone #
Mailing Address: 3213 MANITOWOC RD			
City: GREEN BAY	State: WI	Zip Code: 54311	
County: Brown	Co. Permit #	Notification #	Completed: 04-23-1992

Well Constructor (Business Name): HEIM, ERVIN J	Lic. # 551	Facility ID # (Public Wells)	
Address: 4904 CHURCH RD RT 2 NEW FRANKEN WI 54229		Well Plan Approval #	
		Approval Date (mm-dd-yyyy)	
Hicap Permanent Well #	Common Well #	Specific Capacity: 5	

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

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

1. Well Location
Town of SCOTT

Fire # (if avail.)

Street Address or Road Name and Number

Subdivision Name	Lot #	Block #

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

Method Code

SW NE or Govt Lot #	Section	Township	Range
	16	24 N	22 E

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

Reason for replaced or reconstructed well ?
NEW HOME

Construction Type: Drilled

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
10	Surface	20
6	20	70

Upper Enlarged Drillhole / Lower Open Bedrock

- Rotary - Mud Circulation .....
- Rotary - Air .....
- Rotary - Air & Foam .....
- Drill-Through Casing Hammer
- Reverse Rotary
- Yes — Cable-tool Bit 10in. 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	G	CLAY @ STONES	Surface	20
		P	G	HARDPAN @ GRAVEL	20	65
		L		LIMESTONE ROCK	65	70

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	FT T@C 1945 STEEL PIPE ASTM-53 SAWHILL	Surface	67
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)

7. Grout or Other Sealing Material
Method

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

9. Static Water Level
20 ft. below ground surface

10. Pump Test
Pumping level 25 ft. below surface
Pumping at 25 GP for 0.25 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? Yes

13. Constructor / Supervisory Driller	Lic #	Date Signed
EH		04-23-1992
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		12	Collector Sewer - San or Storm		70
			Sewer - Building Sanitary		50

Comment:

Created On: 06-24-1992 Updated On: 06-24-1992 Review Status: