Well Construction Report
WISCONSIN UNIQUE WELL NUMBER DU384

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

Form 3300-077A

Property Owner: LEON KUSSEROW			Phone #: (715)873-4578
Mailing Address: N4915 AXEN RD			
City: GLEASON	State: WI	Zip Code: 54435	
County: Lincoln	Co. Permit #:	Notification #:	Completed: 01-09-1991

1. Well Location

Town of PINE RIVER

Fire # (if avail.):

Street Address or Road Name and Number: HWY P

Subdivision Name	Lot #	Block #

Well Constructor (Business Name)	Lic. #	Facility ID # (Public Wells)
HORNUNG JAMES A	695	

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

Method Code:

Well Plan Approval #:

SW	SW	Section	Township	Range
or Govt Lot #		27	31 N	7 E

Address: N952 HWY W, MERRILL WI 54452

Approval Date (mm-dd-yyyy):

2. Well Type New Well

of previous unique well # constructed in

Hicap Permanent Well #	Common Well #	Specific Capacity
		0

Reason for replaced or reconstructed well ?

3. Well serves 1 # of

Private,potable

Heat Exchange____# of drillholes

Hicap Well ? No

Hicap Property ? No

Hicap Potable ?

Construction Type: Drilled

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
8	Surface	40
6	40	225

Upper Enlarged Drillhole / Lower Open Bedrock

- Rotary - Mud Circulation .....
- Yes — Rotary - Air .....
- Rotary - Air & Foam .....
- Drill-Through Casing Hammer
- Reverse Rotary
- Cable-tool Bit ____in. 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.)
R		C		RED CLAY	Surface	9
R		Q		RED GRANITE	9	148
K		Q		BLACK GRANITE	148	225

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	FEMCO ASTMA 530 6 5/8 .280 WALL WELDED 18.90USA SAWHILL	Surface	40
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)

9. Static Water Level

12 ft. below ground surface

10. Pump Test

Pumping level 170 ft. below surface

Pumping at 4 GP for 48 Hrs.

Pumping Method ?

11. Well Is

18 in. above grade

Developed ? Yes

Disinfected ? Yes

Capped ? Yes

7. Grout or Other Sealing Material

Method PUMPED

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
NEAT GROUT	Surface	40	9

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? No

NO WELL

13. Constructor / Supervisory Driller	Lic #	Date Signed
JH		12-03-1990
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
JHJ		12-02-1990

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

Comment:

Created On: 03-27-1991 Updated On: 10-15-2026 Review Status: