Well Construction Report
WISCONSIN UNIQUE WELL NUMBER DU399

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

Form 3300-077A

Property Owner: RUBY KOLBE			Phone #
Mailing Address: 9507 PACKER DR			
City: WAUSAU	State: WI	Zip Code: 54401	
County: Marathon	Co. Permit #	Notification #	Completed: 11-20-1990

Well Constructor (Business Name): HORNUNG JAMES A	Lic. #: 695	Facility ID # (Public Wells)	
Address: N952 HWY W MERRILL WI 54452		Well Plan Approval #	
		Approval Date (mm-dd-yyyy)	
Hicap Permanent Well #	Common Well #	Specific Capacity: 0.1	

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

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

1. Well Location
Town of MARATHON

Fire # (if avail.)

Street Address or Road Name and Number

Subdivision Name	Lot #	Block #

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

NE	NW	Section	Township	Range
or Govt Lot #		2	28 N	6 E

2. Well Type Replacement
of previous unique well # constructed in 59

Reason for replaced or reconstructed well ?
UNSAFE WATER

Construction Type: Drilled

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
6	Surface	105

Upper Enlarged Drillhole / Lower Open Bedrock

Yes Rotary - Air .....
Rotary - Mud Circulation .....
Rotary - Air & Foam .....
Drill-Through Casing Hammer
Reverse Rotary
Cable-tool Bit ____in. 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.)
		S	G	SAND GRAVEL	Surface	24
		C	G	CLAY @ GRAVEL	24	37
	D	Q		DEC RED GRANITE	37	42
R		Q		RED GRANITE	42	105

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.)

7. Grout or Other Sealing Material
Method

9. Static Water Level
42 ft. below ground surface

10. Pump Test
Pumping level 95 ft. below surface
Pumping at 5 GP for 1 Hrs.
Pumping Method ?

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

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? No
HOME OWNER WILL

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		100	Sewer - Building Sanitary		75
Building Overhang		15	Septic or Holding, or POWTS Tank		80

Comment:

Created On: 03-27-1991 Updated On: 03-27-1991 Review Status: