Well Construction Report
WISCONSIN UNIQUE WELL NUMBER EC297

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

Form 3300-077A

Property Owner: MCGUIRE | Phone #:

Mailing Address: 2426 BROOKS RD

City: MOSINEE | State: WI | Zip Code: 54455

County: Marathon | Co. Permit # | Notification # | Completed: 05-30-1987

Well Constructor (Business Name): LANG | Lic. # | Facility ID # (Public Wells)

Address | Well Plan Approval #

Approval Date (mm-dd-yyyy)

Hicap Permanent Well # | Common Well # | Specific Capacity

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

Hicap Well ?
Hicap Property ?
Hicap Potable ?

1. Well Location | Fire # (if avail.)

Village of

Street Address or Road Name and Number: 2426 BROOKS RD

Subdivision Name | Lot # | Block #

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

SE SW or Govt Lot # | Section: 31 | Township: 26 N | Range: 7 E

2. Well Type

of previous unique well # constructed in

Reason for replaced or reconstructed well ?

Construction Type

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Upper Enlarged Drillhole / Lower Open Bedrock

- Rotary - Mud Circulation .....
- Rotary - Air .....
- 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

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6		Surface	
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)

9. Static Water Level

_____ ft. _____ground surface

10. Pump Test

Pumping level _____ ft. below surface

Pumping at _____ GP for _____ Hrs.

Pumping Method ?

11. Well Is

_____ in.
_____Grade

Developed ?

Disinfected ?

Capped ?

7. Grout or Other Sealing Material

Method

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed?

13. Constructor / Supervisory Driller	Lic #	Date Signed
Drill Rig Operator	Lic or Reg #	Date Signed

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

Comment:

Created On: 12-03-2021 Updated On: 12-04-2021 Review Status: APPROVED

Note: This well was inventoried. A well construction report was not submitted.

Well Depth: Bedrock Depth: