Well Construction Report
WISCONSIN UNIQUE WELL NUMBER EK176

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

Form 3300-077A

Property Owner: RICHARD KEENE			Phone #: (608)763-2267
Mailing Address: RT 1			
City: POTOSI	State: WI	Zip Code: 53820	
County: Grant	Co. Permit #:	Notification #:	Completed: 05-15-1992

Well Constructor (Business Name): FAHERTY, FRANCIS X	Lic. #: 5824	Facility ID # (Public Wells):
Address: PO BOX 247 PLATTEVILLE WI 53818-0247		Well Plan Approval #: Approval Date (mm-dd-yyyy):
Hicap Permanent Well #:	Common Well #:	Specific Capacity: 0.8

1. Well Location

Town of POTOSI

Fire # (if avail.):

Street Address or Road Name and Number: STAGE RD

Subdivision Name:	Lot #:	Block #:

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

Method Code:

NW SW or Govt Lot #:	Section: 14	Township: 3 N	Range: 3 W

2. Well Type Replacement

of previous unique well #: constructed in:

Reason for replaced or reconstructed well ?: OLD WELL WEAK

Construction Type: Drilled

3. Well serves # of STOCK WELL

Private,potable

Heat Exchange____# of drillholes

Hicap Well ? No

Hicap Property ? No

Hicap Potable ?

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
10	Surface	62
6	62	123

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 .....
- 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	CLAY	Surface	10
L	GALENA LIMESTONE	10	123

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	A-53 19.45#FT. V.S.P. T@C	Surface	62
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**

9. Static Water Level

20 ft. below ground surface

10. Pump Test

Pumping level 50 ft. below surface

Pumping at 25 GP for 0.5 Hrs.

Pumping Method ?

11. Well Is

12 in. above grade

Developed ? Yes

Disinfected ? Yes

Capped ? Yes

7. Grout or Other Sealing Material

Method PRES. PUMPED

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
PORTLAND TYPE 1	Surface	62	25

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed?

13. Constructor / Supervisory Driller	Lic #	Date Signed
FXF		05-17-1992
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
JF		05-16-1992

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

Comment:

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