

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				EL144		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A				
Property Owner RUSS @ PAT RICHTER						Phone # (708)766-6632		1. Well Location				Fire # (if avail.)		
Mailing Address 4410 ORCHARD DR						Town of DELAVAN						Street Address or Road Name and Number		
City DELAVAN				State WI		Zip Code 53115								
County Walworth		Co. Permit #		Notification #		Completed 01-07-1992		Subdivision Name			Lot #		Block #	
Well Constructor (Business Name) CHENEY, JAMES E				Lic. # 339		Facility ID # (Public Wells)		Latitude / Longitude in Decimal Degree (DD) °N °W			Method Code			
Address RT 4 BOX 472 ELKHORN WI 53121-9470				Well Plan Approval #		NW SE		Section 32		Township 2 N		Range 16 E		
				Approval Date (mm-dd-yyyy)		or Govt Lot #		Township 2 N		Range 16 E				
Hicap Permanent Well #		Common Well #		Specific Capacity 0.3		2. Well Type Replacement of previous unique well # constructed in								
3. Well serves 1 # of Private, potable Heat Exchange ____ # of drillholes						Hicap Well ? No		Reason for replaced or reconstructed well ? INSINIFICANT WATER						
						Hicap Property ? No								
Heat Exchange ____ # of drillholes						Hicap Potable ?		Construction Type Drilled						
						Hicap Potable ?								
4. Potential Contamination Sources - ON REVERSE SIDE														
5. Drillhole Dimensions and Construction Method														
Dia. (in.) From (ft.) To (ft.)			Upper Enlarged Drillhole Lower Open Bedrock											
10 Surface 20			Rotary - Mud Circulation Rotary - Air Rotary - Air & Foam Drill-Through Casing Hammer Reverse Rotary <u>Yes</u> Cable-tool Bit 5in. dia... Dual Rotary <u>Yes</u> Temp. Outer Casing 10in. dia <u>Yes</u> Removed? ____depth ft. (If NO explain on back side)											
5 20 69														
8. Geology														
Dia. (in.) From (ft.) To (ft.)			Geology Codes			Type, Caving/Noncaving, Color, Hardness, etc...			From (ft.) To (ft.)					
10 Surface 20			C			PUDDLED CLAY			Surface 20					
5 20 69			Z			CALY @ GRAVEL			20 65					
5 65 69			Y			SAND @ GRAVEL			65 69					
6. Casing, Liner, Screen														
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		9. Static Water Level 10 ft. below ground surface				
5		T/C NEW BLK STEEL 5 9/16 ODX. 258 WALL 15:00 LB.TYPE EW VSPCO B ASTM-A53 B HYDRO TESTED 1950 PSI				Surface		65						
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		10. Pump Test Pumping level 55 ft. below surface Pumping at 15 GP for 4 Hrs. Pumping Method ?				
5		STAINLESS STEEL SCREEN				65		69						
7. Grout or Other Sealing Material														
Method GROUTING														
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement		11. Well Is 12 in. above grade Developed ? Yes Disinfected ? Yes Capped ? Yes				
PUDDLE CLAY				Surface		20		20						
12. Notified Owner of need to fill & seal ? Filled & Sealed Well(s) as needed? Yes														
13. Constructor / Supervisory Driller														
Lic #				Date Signed				Drill Rig Operator JEC						
Lic or Reg #				Date Signed										
01-14-1992				01-14-1992										

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Overhang		10	Collector Sewer - San or Storm		102
			Other Contamination Sources		35

Comment:

Created On: 06-01-1992

Updated On: 06-01-1992

Review Status: