Well Construction Report
WISCONSIN UNIQUE WELL NUMBER EN102

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

Form 3300-077A

Property Owner: GUY PAVEK			Phone #: (715)623-3586
Mailing Address: 723 CEDAR			
City: ANTIGO	State: WI	Zip Code: 54409	
County: Langlade	Co. Permit #:	Notification #:	Completed: 05-11-1992

1. Well Location

Town of POLAR

Fire # (if avail.):

Street Address or Road Name and Number:

Subdivision Name: | Lot #: | Block #:

Well Constructor (Business Name): KOEPPEL, PHILIP J	Lic. #: 667	Facility ID # (Public Wells):	Latitude / Longitude in Decimal Degree (DD): °N °W
Address: W6824 RED RIVER RD ANTIGO WI 54409-9051		Well Plan Approval #:	Method Code:
		Approval Date (mm-dd-yyyy):	

NW	SE	Section	Township	Range
or Govt Lot #		23	31 N	12 E

2. Well Type New Well

of previous unique well #: constructed in:

Reason for replaced or reconstructed well ?

NEW HOME

Construction Type: Drilled

Hicap Permanent Well #:	Common Well #:	Specific Capacity: 2.5

3. Well serves 1 # of

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.)
5	Surface	57

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

Geology Codes	Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
Y	SAND @ GRAVEL	Surface	57

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
5	BLACK STEEL 14.62#/FT. .258" A53B SAWHILL WELDED	Surface	54
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
5	STAINLESS JOHNSON #12	54	57

9. Static Water Level

38 ft. below ground surface

10. Pump Test

Pumping level 46 ft. below surface

Pumping at 20 GP for 1 Hrs.

Pumping Method ?

11. Well Is

24 in. above grade

Developed ? Yes

Disinfected ? Yes

Capped ? Yes

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
PK		05-11-1992
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
PK		

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

Comment:

Created On: 06-03-1992 Updated On: 06-03-1992 Review Status: