

|                                                                            |  |                                                                              |  |                                 |                                 |                                                                                                                                                                                                                                                                                      |                         |                                                                             |                                                                                                                 |                                                                                       |                           |                              |  |
|----------------------------------------------------------------------------|--|------------------------------------------------------------------------------|--|---------------------------------|---------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|---------------------------|------------------------------|--|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b>     |  |                                                                              |  | <b>EN104</b>                    |                                 | <b>Drinking Water and Groundwater - DG/5</b><br><b>Department of Natural Resources, Box 7921</b><br><b>Madison WI 53707</b>                                                                                                                                                          |                         |                                                                             |                                                                                                                 | <small>Form 3300-077A</small>                                                         |                           |                              |  |
| <b>Property Owner</b> WILLIAM MAJEST                                       |  |                                                                              |  |                                 | <b>Phone #</b><br>(715)484-4202 |                                                                                                                                                                                                                                                                                      | <b>1. Well Location</b> |                                                                             |                                                                                                                 |                                                                                       | <b>Fire # (if avail.)</b> |                              |  |
| <b>Mailing Address</b> N6186 HIGH POINT RD                                 |  |                                                                              |  |                                 | Town of WOLF RIVER              |                                                                                                                                                                                                                                                                                      |                         |                                                                             |                                                                                                                 |                                                                                       |                           |                              |  |
| <b>City</b> WHITE LAKE                                                     |  |                                                                              |  |                                 | <b>State</b> WI                 |                                                                                                                                                                                                                                                                                      | <b>Zip Code</b> 54491   |                                                                             |                                                                                                                 |                                                                                       |                           |                              |  |
| <b>County</b><br>Langlade                                                  |  | <b>Co. Permit #</b>                                                          |  | <b>Notification #</b>           |                                 | <b>Completed</b><br>05-14-1992                                                                                                                                                                                                                                                       |                         | <b>Street Address or Road Name and Number</b><br>N6186 HIGH POINT RD        |                                                                                                                 |                                                                                       |                           |                              |  |
| <b>Well Constructor (Business Name)</b><br>KOEPPPEL, PHILIP J              |  |                                                                              |  | <b>Lic. #</b><br>667            |                                 | <b>Facility ID # (Public Wells)</b>                                                                                                                                                                                                                                                  |                         | <b>Latitude / Longitude in Decimal Degree (DD)</b><br>45.251 °N -88.7604 °W |                                                                                                                 |                                                                                       |                           | <b>Method Code</b><br>GCD013 |  |
| <b>Address</b> W6824 RED RIVER RD<br>ANTIGO WI 54409-9051                  |  |                                                                              |  | <b>Well Plan Approval #</b>     |                                 | <b>Approval Date (mm-dd-yyyy)</b>                                                                                                                                                                                                                                                    |                         | <b>NW SW Section Township Range</b><br>or Govt Lot # 16 32 N 14 E           |                                                                                                                 | <b>2. Well Type</b> Replacement                                                       |                           |                              |  |
| <b>Hicap Permanent Well #</b>                                              |  | <b>Common Well #</b>                                                         |  | <b>Specific Capacity</b><br>6.7 |                                 | <b>Reason for replaced or reconstructed well ?</b><br>FAILING POINT                                                                                                                                                                                                                  |                         |                                                                             |                                                                                                                 |                                                                                       |                           |                              |  |
| <b>3. Well serves</b> 1 # of Private, potable                              |  |                                                                              |  | <b>Hicap Well ?</b> No          |                                 | <b>Hicap Property ?</b> No                                                                                                                                                                                                                                                           |                         | <b>Construction Type</b> Drilled                                            |                                                                                                                 | <b>Heat Exchange</b> ____ # of drillholes                                             |                           |                              |  |
| <b>Heat Exchange</b> ____ # of drillholes                                  |  |                                                                              |  | <b>Hicap Potable ?</b>          |                                 |                                                                                                                                                                                                                                                                                      |                         |                                                                             |                                                                                                                 |                                                                                       |                           |                              |  |
| <b>4. Potential Contamination Sources - ON REVERSE SIDE</b>                |  |                                                                              |  |                                 |                                 |                                                                                                                                                                                                                                                                                      |                         |                                                                             |                                                                                                                 |                                                                                       |                           |                              |  |
| <b>5. Drillhole Dimensions and Construction Method</b>                     |  |                                                                              |  |                                 |                                 |                                                                                                                                                                                                                                                                                      |                         |                                                                             |                                                                                                                 |                                                                                       |                           |                              |  |
| <b>Dia. (in.)</b>                                                          |  | <b>From (ft.)</b>                                                            |  | <b>To (ft.)</b>                 |                                 | <b>Upper Enlarged Drillhole</b>                                                                                                                                                                                                                                                      |                         |                                                                             | <b>Lower Open Bedrock</b>                                                                                       |                                                                                       |                           |                              |  |
| 5                                                                          |  | Surface                                                                      |  | 62                              |                                 | Rotary - Mud Circulation .....<br>Rotary - Air .....<br>Rotary - Air & Foam .....<br>Drill-Through Casing Hammer<br>Reverse Rotary<br>Cable-tool Bit ____ in. dia...<br>Dual Rotary .....<br>Temp. Outer Casing ____ in. dia<br>Removed? ____ depth ft. (If NO explain on back side) |                         |                                                                             | <b>8. Geology</b>                                                                                               |                                                                                       |                           |                              |  |
|                                                                            |  |                                                                              |  |                                 |                                 |                                                                                                                                                                                                                                                                                      |                         |                                                                             | Geology Codes Type, Caving/Noncaving, Color, Hardness, etc... From (ft.) To (ft.)<br>Y SAND @ GRAVEL Surface 62 |                                                                                       |                           |                              |  |
| <b>6. Casing, Liner, Screen</b>                                            |  |                                                                              |  |                                 |                                 |                                                                                                                                                                                                                                                                                      |                         |                                                                             |                                                                                                                 |                                                                                       |                           |                              |  |
| <b>Dia. (in.)</b>                                                          |  | <b>Material, Weight, Specification Manufacturer &amp; Method of Assembly</b> |  |                                 |                                 | <b>From (ft.)</b>                                                                                                                                                                                                                                                                    |                         | <b>To (ft.)</b>                                                             |                                                                                                                 | <b>9. Static Water Level</b>                                                          |                           |                              |  |
| 5                                                                          |  | BLACK STEEL 14.62#/FT. .258" A53B WELDED SAWHILL                             |  |                                 |                                 | Surface                                                                                                                                                                                                                                                                              |                         | 59                                                                          |                                                                                                                 | 46 ft. below ground surface                                                           |                           |                              |  |
| <b>Dia. (in.)</b>                                                          |  | <b>Screen type, material &amp; slot size</b>                                 |  |                                 |                                 | <b>From (ft.)</b>                                                                                                                                                                                                                                                                    |                         | <b>To (ft.)</b>                                                             |                                                                                                                 | <b>10. Pump Test</b>                                                                  |                           |                              |  |
| 5                                                                          |  | STAINLESS JOHNSON #12                                                        |  |                                 |                                 | 59                                                                                                                                                                                                                                                                                   |                         | 62                                                                          |                                                                                                                 | Pumping level 49 ft. below surface<br>Pumping at 20 GP for 1 Hrs.<br>Pumping Method ? |                           |                              |  |
| <b>7. Grout or Other Sealing Material</b>                                  |  |                                                                              |  |                                 |                                 |                                                                                                                                                                                                                                                                                      |                         |                                                                             |                                                                                                                 |                                                                                       |                           |                              |  |
| <b>Method</b>                                                              |  |                                                                              |  |                                 |                                 |                                                                                                                                                                                                                                                                                      |                         |                                                                             |                                                                                                                 |                                                                                       |                           |                              |  |
| <b>11. Well Is</b>                                                         |  |                                                                              |  |                                 |                                 |                                                                                                                                                                                                                                                                                      |                         |                                                                             |                                                                                                                 |                                                                                       |                           |                              |  |
| 20 in. above grade<br>Developed ? Yes<br>Disinfected ? Yes<br>Capped ? Yes |  |                                                                              |  |                                 |                                 |                                                                                                                                                                                                                                                                                      |                         |                                                                             |                                                                                                                 |                                                                                       |                           |                              |  |
| <b>12. Notified Owner of need to fill &amp; seal ?</b>                     |  |                                                                              |  |                                 |                                 |                                                                                                                                                                                                                                                                                      |                         |                                                                             |                                                                                                                 |                                                                                       |                           |                              |  |
| Filled & Sealed Well(s) as needed? No<br>STILL IN USE                      |  |                                                                              |  |                                 |                                 |                                                                                                                                                                                                                                                                                      |                         |                                                                             |                                                                                                                 |                                                                                       |                           |                              |  |
| <b>13. Constructor / Supervisory Driller</b>                               |  |                                                                              |  |                                 |                                 |                                                                                                                                                                                                                                                                                      |                         | <b>Lic #</b>                                                                |                                                                                                                 | <b>Date Signed</b>                                                                    |                           |                              |  |
| PK                                                                         |  |                                                                              |  |                                 |                                 |                                                                                                                                                                                                                                                                                      |                         |                                                                             |                                                                                                                 | 05-14-1992                                                                            |                           |                              |  |
| <b>Drill Rig Operator</b>                                                  |  |                                                                              |  |                                 |                                 |                                                                                                                                                                                                                                                                                      |                         | <b>Lic or Reg #</b>                                                         |                                                                                                                 | <b>Date Signed</b>                                                                    |                           |                              |  |
| PK                                                                         |  |                                                                              |  |                                 |                                 |                                                                                                                                                                                                                                                                                      |                         |                                                                             |                                                                                                                 |                                                                                       |                           |                              |  |

**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) |           | 60       | Shoreline/Pool                   |           | 80       |
| Building Overhang                                         |           | 8        | Wastewater Sump                  |           | 48       |
| Downspout/Yard Hydrant                                    |           | 30       | Sewer - Building Sanitary        |           | 60       |
|                                                           |           |          | Septic or Holding, or POWTS Tank |           | 60       |

Comment:

Created On: 06-03-1992

Updated On: 06-12-2020

Review Status: