Well Construction Report
WISCONSIN UNIQUE WELL NUMBER EP456

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

Form 3300-077A

Property Owner: MOUNTAIN PUMP			Phone #: (715)276-7812
Mailing Address: 14809 BEAR PAW TRL			
City: MOUNTAIN	State: WI	Zip Code: 54149	
County: Oconto	Co. Permit #:	Notification #:	Completed: 06-04-1992

1. Well Location

Town of STILES

Fire # (if avail.):

Street Address or Road Name and Number:

Subdivision Name	Lot #	Block #

Well Constructor (Business Name)	Lic. #	Facility ID # (Public Wells)
YOUNG, BERNARD	696	

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

Method Code:

Well Plan Approval #:

NE	NW	Section	Township	Range
or Govt Lot #		35	28 N	20 E

Address: 10358 HWY 22E
GILLETT WI 54124

Approval Date (mm-dd-yyyy):

2. Well Type New Well

of previous unique well #: constructed in

Hicap Permanent Well #	Common Well #	Specific Capacity

Reason for replaced or reconstructed well ?

WATER FOR HOME

3. Well serves 1 # of

Private,potable

Heat Exchange____# of drillholes

Hicap Well ? No

Hicap Property ? No

Hicap Potable ?

Construction Type: Drilled

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
6	Surface	50

Upper Enlarged Drillhole / Lower Open Bedrock

- Rotary - Mud Circulation .....
- Rotary - Air .....
- Rotary - Air & Foam .....
- Drill-Through Casing Hammer
- Reverse Rotary
- Yes — 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.)
S	SAND	Surface	32
C	CLAY	32	45
G	GRAVEL	45	50

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	SAWHILL STEEL 1780 PSI ASTM A-53 WELDED 18.97	Surface	50
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)

9. Static Water Level

10 ft. above ground surface

10. Pump Test

Pumping level 2 ft. below surface

Pumping at 50 GP for 2 Hrs.

Pumping Method ?

11. Well Is

12 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? Yes

13. Constructor / Supervisory Driller	Lic #	Date Signed
BY		06-04-1992
Drill Rig Operator	Lic or Reg #	Date Signed
BY		

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

Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		84

Type	Qualifier	Distance
Building Overhang		5
Septic or Holding, or POWTS Tank		59

Comment:

Created On: 06-24-1992 Updated On: 10-15-2026 Review Status: