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): YOUNG, BERNARD	Lic. #: 696	Facility ID # (Public Wells):	Latitude / Longitude in Decimal Degree (DD): °N °W	Method Code:
		Well Plan Approval #:	NE NW or Govt Lot #:	Section: 35 — Township: 28 N — Range: 20 E
Address: 10358 HWY 22E GILLETT WI 54124		Approval Date (mm-dd-yyyy):		
Hicap Permanent Well #:	Common Well #:	Specific Capacity: 4.2		

2. Well Type New Well
of previous unique well # — constructed in
Reason for replaced or reconstructed well ?
WATER FOR HOME
Construction Type: Drilled

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.)
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: 06-24-1992 Review Status: