Well Construction Report
WISCONSIN UNIQUE WELL NUMBER EQ265

Drinking Water and Groundwater - DG/5
Department of Natural Resources, Box 7921
Madison WI 53707
Form 3300-077A

Property Owner: SCOTT SACOTTE	Phone #: (414)825-7285
Mailing Address: HWY 57	
City: STURGEON BAY	State: WI — Zip Code: 54235
County: Door	Co. Permit #: — Notification #: — Completed: 01-10-1992
Well Constructor (Business Name): EUCLIDE WELL DRILLING	Lic. #: 5860 — Facility ID # (Public Wells):
Address: 2596 STONE RD, STURGEON BAY WI 54235-9255	Well Plan Approval #: — Approval Date (mm-dd-yyyy):
Hicap Permanent Well #:	Common Well #: — Specific Capacity: 0.5

1. Well Location
Town of GARDNER
Fire # (if avail.):
Street Address or Road Name and Number:
Subdivision Name: — Lot #: — Block #:
Latitude / Longitude in Decimal Degree (DD): °N °W
Method Code:
NE SW or Govt Lot #: — Section: 36 — Township: 27 N — Range: 24 E

2. Well Type New Well
of previous unique well #: — constructed in:
Reason for replaced or reconstructed well ?
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.)
10	Surface	19
8	19	170
6	170	235

Upper Enlarged Drillhole / Lower Open Bedrock

Yes — 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.)
Z	CLAY @ GRAVEL	Surface	19
L	LIME ROCK	19	235

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	NEW BLACK STEEL P.E. WT. 18.97 A-53 NEWPORT	Surface	170
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)

9. Static Water Level
18 ft. below ground surface

10. Pump Test
Pumping level 40 ft. below surface
Pumping at 10 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 PRESSURE

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
MUD	Surface	6	
CEMENT	6	170	48

12. Notified Owner of need to fill & seal ?
Filled & Sealed Well(s) as needed? No
NONE

13. Constructor / Supervisory Driller	Lic #	Date Signed
ME		03-16-1992
Drill Rig Operator	Lic or Reg #	Date Signed
WD		03-31-1992

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Overhang		12	Septic or Holding, or POWTS Tank		60

Comment:

Created On: 04-27-1992 Updated On: 04-27-1992 Review Status: