Well Construction Report
WISCONSIN UNIQUE WELL NUMBER EQ355

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

Property Owner	AMIL DAHL
Phone #	(414)725-7505
Mailing Address	315 6TH ST
City	MENASHA
State	WI
Zip Code	54952
County	Portage
Co. Permit #	
Notification #	
Completed	05-04-1992
Well Constructor (Business Name)	SULLIVAN, LYLE C
Lic. #	120
Facility ID # (Public Wells)	
Address	RT 2 BOX 235 FREDERIC WI 54837-9593
Well Plan Approval #	
Approval Date (mm-dd-yyyy)	
Hicap Permanent Well #	
Common Well #	
Specific Capacity	

1. Well Location
Town of LANARL
Fire # (if avail.)
Street Address or Road Name and Number
Subdivision Name
Lot #
Block #
Latitude / Longitude in Decimal Degree (DD) °N °W
Method Code

NW	SE	Section	Township	Range
or Govt Lot #		30	22 N	10 E

2. Well Type New Well
of previous unique well # constructed in
Reason for replaced or reconstructed well ?
Construction Type Driven Point

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.)
1.25	Surface	31

Upper Enlarged Drillhole
Lower Open Bedrock
Rotary - Mud Circulation .....
Rotary - Air .....
Rotary - Air & Foam .....
Drill-Through Casing Hammer
Reverse Rotary
Yes Cable-tool Bit 1.25in. 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	31

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
1.25	ASTM A53 USS STEEL 2.30# PER FT THREADED @ COUPLED1.25 OD .140 WALL TYPE TOTAL WEIGHT 71.30	Surface	31

Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)
1.25	DRIVE POINT		31

9. Static Water Level
17 ft. below ground surface

10. Pump Test
Pumping level 17 ft. below surface
Pumping at 6 GP for 2 Hrs.
Pumping Method ?

11. Well Is
14 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
JF		05-06-1992
Drill Rig Operator	Lic or Reg #	Date Signed
JF		05-06-1992

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

Comment:

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