

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				EQ777		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A							
Property Owner ANN CHAPMAN						Phone # (715)369-1606		1. Well Location				Fire # (if avail.) 209					
Mailing Address 209 HOMESTEAD						Town of PELICAN						Street Address or Road Name and Number HOMESTEAD					
City RHINELANDER				State WI		Zip Code 54501											
County Oneida		Co. Permit #		Notification #		Completed 05-06-1992		Subdivision Name				Lot # Block #					
Well Constructor (Business Name) JELINEK, DAVID C				Lic. # 43		Facility ID # (Public Wells)		Latitude / Longitude in Decimal Degree (DD) °N °W				Method Code					
Address 2791 BAY DR RHINELANDER WI 54501-9465				Well Plan Approval #		NW NW Section Township Range or Govt Lot # 8 36 N 9 E		2. Well Type Replacement of previous unique well # constructed in Reason for replaced or reconstructed well ? OLD WELL LOW PRODUCER									
				Approval Date (mm-dd-yyyy)													
Hicap Permanent Well #		Common Well #		Specific Capacity 0.8		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						8. Geology											
Dia. (in.)		From (ft.)		To (ft.)		Upper Enlarged Drillhole		Lower Open Bedrock		Geology Codes		Type, Caving/Noncaving, Color, Hardness, etc...		From (ft.)		To (ft.)	
6		Surface		60		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)		Y M N S T S		SAND @ GRAVEL (DIRTY)		Surface		25			
		SILT		25						50							
		VERY FINE SAND (GREY)		50						55							
		CLEAN BROWN SAND		55						60							
6. Casing, Liner, Screen						9. Static Water Level				11. Well Is							
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		8 ft. below ground surface				14 in. above grade			
6		SAWHILL STEEL A53B 18.97#/FT WELDED				Surface		57		10. Pump Test Pumping level 20 ft. below surface Pumping at 10 GP for 1 Hrs. Pumping Method ?				Developed ? Yes Disinfected ? Yes Capped ? Yes			
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)									
6		JOHNSON STAINLESS				57		60									
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					
						DJ						05-12-1992					
						Drill Rig Operator				Lic or Reg #		Date Signed					

4a. Potential Contamination Sources

Is the well located in floodplain ?

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Overhang		15	Septic or Holding, or POWTS Tank		100

Comment:

Created On: 06-03-1992

Updated On: 06-03-1992

Review Status: