Well Construction Report
WISCONSIN UNIQUE WELL NUMBER EQ787

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

Form 3300-077A

Property Owner: BOB DIONNE	Phone #: (715)369-1866
Mailing Address: 2175 CARLEY LN	
City: RHINELANDER	State: WI — Zip Code: 54501
County: Oneida	Co. Permit #:
Notification #	Completed: 05-06-1992
Well Constructor (Business Name): JELINEK, DAVID C	Lic. #: 43
Facility ID # (Public Wells)	
Well Plan Approval #	
Address: 2791 BAY DR RHINELANDER WI 54501-9465	Approval Date (mm-dd-yyyy):
Hicap Permanent Well #	Common Well #
Specific Capacity: 1.7	

1. Well Location

Town of CRESCENT

Fire # (if avail.)

Street Address or Road Name and Number: RANGE LINE

Subdivision Name	Lot #	Block #	
Latitude / Longitude in Decimal Degree (DD) °N °W			Method Code
SE SE or Govt Lot #	Section: 24	Township: 36 N	Range: 8 E

2. Well Type New Well

of previous unique well # constructed in

Reason for replaced or reconstructed well ?: NEW 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	60

Upper Enlarged Drillhole — Lower Open Bedrock

- 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.)
T		S	G	CAVING BROWN SAND @ GRAVEL	Surface	60

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	SAWHILL STEEL A53B 18.97#/FT WELDED	Surface	57
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)
6	JOHNSON STAINLESS	57	60

7. Grout or Other Sealing Material

Method

9. Static Water Level

39 ft. below ground surface

10. Pump Test

Pumping level 45 ft. below surface

Pumping at 10 GP for 2 Hrs.

Pumping Method ?

11. Well Is

14 in. above grade

Developed ? Yes

Disinfected ? Yes

Capped ? Yes

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? Yes

13. Constructor / Supervisory Driller	Lic #	Date Signed
DJ		05-14-1992
Drill Rig Operator	Lic or Reg #	Date Signed

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

Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)	>	60

Type	Qualifier	Distance
Building Overhang		20
Septic or Holding, or POWTS Tank	>	30

Comment:

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