

|                                                                        |  |                                                                      |  |              |  |                                                                                                                             |  |                              |  |                                              |  |                                                           |  |                                                        |  |                                                 |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
|------------------------------------------------------------------------|--|----------------------------------------------------------------------|--|--------------|--|-----------------------------------------------------------------------------------------------------------------------------|--|------------------------------|--|----------------------------------------------|--|-----------------------------------------------------------|--|--------------------------------------------------------|--|-------------------------------------------------|--|-----------------------------|--|------------|--|----------------|--|--|--|-------------------------------|--|--|--|-------------------|--|--|--|-----------------------------|--|--|--|-----------------------------------------------------|--|--|--|------|--|--|--|---------|--|--|--|---|--|--|--|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b> |  |                                                                      |  | <b>FP982</b> |  | <b>Drinking Water and Groundwater - DG/5</b><br><b>Department of Natural Resources, Box 7921</b><br><b>Madison WI 53707</b> |  |                              |  | Form 3300-077A                               |  |                                                           |  |                                                        |  |                                                 |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| Property Owner JENSEN, MEL                                             |  |                                                                      |  |              |  | Phone # (715)289-3686                                                                                                       |  | <b>1. Well Location</b>      |  |                                              |  | Fire # (if avail.)                                        |  |                                                        |  |                                                 |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| Mailing Address RR 3 BOX 103                                           |  |                                                                      |  |              |  | Town of LUDINGTON                                                                                                           |  |                              |  |                                              |  | 2358                                                      |  |                                                        |  |                                                 |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| City CADOTT                                                            |  |                                                                      |  |              |  | State WI                                                                                                                    |  | Zip Code 54727               |  |                                              |  | Street Address or Road Name and Number                    |  |                                                        |  |                                                 |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| County Eau Claire                                                      |  |                                                                      |  |              |  | Co. Permit # W08925                                                                                                         |  | Notification #               |  | Completed 12-14-1993                         |  | Subdivision Name                                          |  | Lot #                                                  |  | Block #                                         |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| Well Constructor (Business Name) VERN PEAK                             |  |                                                                      |  |              |  | Lic. # 14                                                                                                                   |  | Facility ID # (Public Wells) |  | Latitude / Longitude in Decimal Degree (DD)  |  |                                                           |  | Method Code                                            |  |                                                 |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| Address RT 3 BOX 215<br>CADOTT WI 54727-9114                           |  |                                                                      |  |              |  | Well Plan Approval #                                                                                                        |  | Approval Date (mm-dd-yyyy)   |  | °N °W                                        |  | NW NW Section Township Range<br>or Govt Lot # 34 27 N 6 W |  | <b>2. Well Type</b> New Well                           |  |                                                 |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| Hicap Permanent Well #                                                 |  |                                                                      |  |              |  | Common Well #                                                                                                               |  | Specific Capacity 1.7        |  | Reason for replaced or reconstructed well ?  |  |                                                           |  | NEW HOME                                               |  |                                                 |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| <b>3. Well serves</b> 1 # of Private, potable                          |  |                                                                      |  |              |  | Hicap Well ? No                                                                                                             |  | Hicap Property ? No          |  | Construction Type Drilled                    |  |                                                           |  | Heat Exchange ___ # of drillholes                      |  | Hicap Potable ?                                 |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| <b>4. Potential Contamination Sources - ON REVERSE SIDE</b>            |  |                                                                      |  |              |  |                                                                                                                             |  |                              |  |                                              |  |                                                           |  | <b>5. Drillhole Dimensions and Construction Method</b> |  | <b>8. Geology</b>                               |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| Dia. (in.)                                                             |  | From (ft.)                                                           |  | To (ft.)     |  | Upper Enlarged Drillhole                                                                                                    |  |                              |  | Lower Open Bedrock                           |  |                                                           |  | Geology Codes                                          |  | Type, Caving/Noncaving, Color, Hardness, etc... |  |                             |  | From (ft.) |  | To (ft.)       |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| 8                                                                      |  | Surface                                                              |  | 37           |  | Rotary - Mud Circulation .....                                                                                              |  |                              |  | Rotary - Air .....                           |  |                                                           |  | Rotary - Air & Foam .....                              |  |                                                 |  | Drill-Through Casing Hammer |  |            |  | Reverse Rotary |  |  |  | Cable-tool Bit ___ in. dia... |  |  |  | Dual Rotary ..... |  |  |  | Temp. Outer Casing 8in. dia |  |  |  | Removed? ___ depth ft. (If NO explain on back side) |  |  |  | CLAY |  |  |  | Surface |  |  |  | 6 |  |  |  |
| 6                                                                      |  | 37                                                                   |  | 76           |  | Yes                                                                                                                         |  |                              |  | Yes                                          |  |                                                           |  | Yes                                                    |  |                                                 |  | CLAY @ SHALE                |  |            |  | 6              |  |  |  | 12                            |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
|                                                                        |  |                                                                      |  |              |  | Yes                                                                                                                         |  |                              |  | Yes                                          |  |                                                           |  | Yes                                                    |  |                                                 |  | SANDROCK                    |  |            |  | 12             |  |  |  | 76                            |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| <b>6. Casing, Liner, Screen</b>                                        |  |                                                                      |  |              |  |                                                                                                                             |  |                              |  |                                              |  |                                                           |  | <b>9. Static Water Level</b>                           |  |                                                 |  | <b>11. Well Is</b>          |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| Dia. (in.)                                                             |  | Material, Weight, Specification<br>Manufacturer & Method of Assembly |  |              |  | From (ft.)                                                                                                                  |  | To (ft.)                     |  | 44 ft. below ground surface                  |  |                                                           |  | 24 in. above grade                                     |  |                                                 |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| 6                                                                      |  | STEEL 1.,97 A53B U.S. SAWHILL P.E. WELDED                            |  |              |  | Surface                                                                                                                     |  | 38                           |  | <b>10. Pump Test</b>                         |  |                                                           |  | Developed ? Yes                                        |  |                                                 |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| Dia. (in.)                                                             |  | Screen type, material & slot size                                    |  |              |  | From (ft.)                                                                                                                  |  | To (ft.)                     |  | Pumping level 50 ft. below surface           |  |                                                           |  | Disinfected ? Yes                                      |  |                                                 |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
|                                                                        |  |                                                                      |  |              |  |                                                                                                                             |  |                              |  | Pumping at 10 GP M for 2 Hrs.                |  |                                                           |  | Capped ? Yes                                           |  |                                                 |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
|                                                                        |  |                                                                      |  |              |  |                                                                                                                             |  |                              |  | Pumping Method ?                             |  |                                                           |  |                                                        |  |                                                 |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| <b>7. Grout or Other Sealing Material</b>                              |  |                                                                      |  |              |  |                                                                                                                             |  |                              |  |                                              |  |                                                           |  | <b>12. Notified Owner of need to fill &amp; seal ?</b> |  |                                                 |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| Method PPRESSURE GROUT                                                 |  |                                                                      |  |              |  |                                                                                                                             |  |                              |  |                                              |  |                                                           |  | Filled & Sealed Well(s) as needed?                     |  |                                                 |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| Kind of Sealing Material                                               |  |                                                                      |  | From (ft.)   |  | To (ft.)                                                                                                                    |  | # Sacks Cement               |  | <b>13. Constructor / Supervisory Driller</b> |  |                                                           |  | Lic #                                                  |  | Date Signed                                     |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
| NEAT CEMENT GROUT                                                      |  |                                                                      |  | Surface      |  | 37                                                                                                                          |  | 5 S                          |  | VP                                           |  |                                                           |  |                                                        |  | 12-14-1993                                      |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
|                                                                        |  |                                                                      |  |              |  |                                                                                                                             |  |                              |  | Drill Rig Operator                           |  |                                                           |  | Lic or Reg #                                           |  | Date Signed                                     |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |
|                                                                        |  |                                                                      |  |              |  |                                                                                                                             |  |                              |  |                                              |  |                                                           |  |                                                        |  |                                                 |  |                             |  |            |  |                |  |  |  |                               |  |  |  |                   |  |  |  |                             |  |  |  |                                                     |  |  |  |      |  |  |  |         |  |  |  |   |  |  |  |

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

| Type                                                      | Qualifier | Distance | Type                             | Qualifier | Distance |
|-----------------------------------------------------------|-----------|----------|----------------------------------|-----------|----------|
| POWTS dispersal component (soil absorption unit or mound) |           | 112      | Clearwater Sump                  | >         | 30       |
| Building Overhang                                         |           | 18       | Sewer - Building Sanitary        | >         | 40       |
|                                                           |           |          | Septic or Holding, or POWTS Tank |           | 97       |

Comment:

Created On: 02-02-1994

Updated On: 02-02-1994

Review Status: