Well Construction Report
WISCONSIN UNIQUE WELL NUMBER HD964

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

Form 3300-077A

Property Owner: LIEDS NURSERY			Phone #
Mailing Address: N63 W22039 HWY 74			
City: SUSSEX	State: WI	Zip Code: 53089	
County: Ozaukee	Co. Permit #	Notification #	Completed: 04-06-1996

Well Constructor (Business Name): DARYL BUTCH GIBOUR	Lic. #: 17	Facility ID # (Public Wells)	
Address: 7482 CIRCLE DR LANNON WI 53046		Well Plan Approval #	
		Approval Date (mm-dd-yyyy)	
Hicap Permanent Well #	Common Well #	Specific Capacity: 5	

1. Well Location

City of MEQUON

Fire # (if avail.)

Street Address or Road Name and Number: 7545 W MEQUON

Subdivision Name	Lot #	Block #	
Latitude / Longitude in Decimal Degree (DD): °N °W			Method Code
NW NW or Govt Lot #	Section: 27	Township: 9 N	Range: 21 E

2. Well Type New Well

of previous unique well # constructed in

Reason for replaced or reconstructed well ?: IRRIGATION

Construction Type: Drilled

3. Well serves # 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	170

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.)
C	CLAY	Surface	150
L	LIMESTONE	150	170

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	ASTM A53B B E SAWHILL	Surface	150
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)

9. Static Water Level

60 ft. below ground surface

10. Pump Test

Pumping level 62 ft. below surface

Pumping at 10 GP M for 4 Hrs.

Pumping Method ?

11. Well Is

14 in. above grade

Developed ? Yes

Disinfected ? Yes

Capped ? Yes

7. Grout or Other Sealing Material

Method

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
GRANULAR BENTONITE	Surface	0	

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed?

13. Constructor / Supervisory Driller	Lic #	Date Signed
BG		04-10-1996
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
BG		

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

Type	Qualifier	Distance
Building Overhang		8

Comment:

Created On: 05-16-1996 Updated On: 05-16-1996 Review Status: