# Well Construction Report
## *WISCONSIN UNIQUE WELL NUMBER* HM228

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

Form 3300-077A

| | |
|---|---|
| Property Owner: SIEGER, JOHN | Phone # |
| Mailing Address: W23329 LAKE RD | |
| City: TREMPEALEAU | State: WI — Zip Code: 54661 |
| County: Trempealeau | Co. Permit # | Notification # | Completed: 04-24-1998 |
| Well Constructor (Business Name): WILLIAM M FINCH | Lic. #: 47 | Facility ID # (Public Wells) |
| Address: W1601 CTY HWY D, MELROSE WI 54642 | Well Plan Approval # | Approval Date (mm-dd-yyyy) |
| Hicap Permanent Well # | Common Well # | Specific Capacity: 5.5 |

**1. Well Location**

Town of TREMPEALEAU

Fire # (if avail.)

Street Address or Road Name and Number

| Subdivision Name | Lot # | Block # |
|---|---|---|
| | | |

Latitude / Longitude in Decimal Degree (DD): °N °W — Method Code

| SW | SE | Section | Township | Range |
|---|---|---|---|---|
| or Govt Lot # | | 35 | 18 N | 9 W |

**2. Well Type** Replacement

of previous unique well # constructed in

Reason for replaced or reconstructed well ?

SAND POINT FAILURE

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.) |
|---|---|---|
| 4 | Surface | 84 |

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 .....

Yes 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 | C | SAND CLAY | Surface | 40 |
| | | S | | SAND | 40 | 84 |

**6. Casing, Liner, Screen**

| Dia. (in.) | Material, Weight, Specification Manufacturer & Method of Assembly | From (ft.) | To (ft.) |
|---|---|---|---|
| 4 | NEW SAWHILL A53B ASTM A53B 4 50X237 | Surface | 80 |
| Dia. (in.) | Screen type, material & slot size | From (ft.) | To (ft.) |
| 4 | SS TEL 10 SLOT | 80 | 84 |

**9. Static Water Level**

8 ft. below ground surface

**10. Pump Test**

Pumping level 12 ft. below surface

Pumping at 22 GP M for 24 Hrs.

Pumping Method ?

**11. Well Is**

96 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? Yes

| **13.** Constructor / Supervisory Driller | Lic # | Date Signed |
|---|---|---|
| WF | | 04-24-1998 |
| Drill Rig Operator | Lic or Reg # | Date Signed |
| | | |

**4a. Potential Contamination Sources** Is the well located in floodplain ? Yes

| Type | Qualifier | Distance | Type | Qualifier | Distance |
|---|---|---|---|---|---|
| Building Overhang | | 75 | Sewer - Building Sanitary | | 75 |

Comment:

Created On: 05-14-1998 Updated On: 05-14-1998 Review Status: