

|                                                                          |  |                                                                      |  |                            |  |                                                                                                                                                                                                                                                                                   |  |                           |  |                                                                       |  |                                                                |  |                                                        |  |                                                 |  |                    |  |          |  |
|--------------------------------------------------------------------------|--|----------------------------------------------------------------------|--|----------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------|--|-----------------------------------------------------------------------|--|----------------------------------------------------------------|--|--------------------------------------------------------|--|-------------------------------------------------|--|--------------------|--|----------|--|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b>   |  |                                                                      |  | <b>HP458</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 MILLER, LAVERNE                                           |  |                                                                      |  |                            |  | Phone # (715)234-1115                                                                                                                                                                                                                                                             |  | <b>1. Well Location</b>   |  |                                                                       |  | Fire # (if avail.)                                             |  |                                                        |  |                                                 |  |                    |  |          |  |
| Mailing Address 2405 23RD AVE                                            |  |                                                                      |  |                            |  | Town of DOYLE                                                                                                                                                                                                                                                                     |  |                           |  |                                                                       |  | 2405                                                           |  |                                                        |  |                                                 |  |                    |  |          |  |
| City RICE LAKE                                                           |  |                                                                      |  |                            |  | State WI                                                                                                                                                                                                                                                                          |  | Zip Code 54868            |  |                                                                       |  | Street Address or Road Name and Number<br>2405 23RD AVE HWY 48 |  |                                                        |  |                                                 |  |                    |  |          |  |
| County Barron                                                            |  | Co. Permit #                                                         |  | Notification #             |  | Completed 07-06-1994                                                                                                                                                                                                                                                              |  | Subdivision Name          |  |                                                                       |  | Lot #                                                          |  | Block #                                                |  |                                                 |  |                    |  |          |  |
| Well Constructor (Business Name)<br>JEROME WOJTKIEWICZ                   |  |                                                                      |  | Lic. # 561                 |  | Facility ID # (Public Wells)                                                                                                                                                                                                                                                      |  |                           |  | Latitude / Longitude in Decimal Degree (DD)<br>45.5373 °N -91.6614 °W |  |                                                                |  | Method Code<br>GCD013                                  |  |                                                 |  |                    |  |          |  |
| Address 1386 24 1/2 ST<br>CAMERON WI 54822                               |  |                                                                      |  | Well Plan Approval #       |  |                                                                                                                                                                                                                                                                                   |  | NW                        |  | NW                                                                    |  | Section 7                                                      |  | Township 35 N                                          |  | Range 10 W                                      |  |                    |  |          |  |
|                                                                          |  |                                                                      |  | Approval Date (mm-dd-yyyy) |  |                                                                                                                                                                                                                                                                                   |  | or Govt Lot #             |  |                                                                       |  |                                                                |  |                                                        |  |                                                 |  |                    |  |          |  |
| Hicap Permanent Well #                                                   |  |                                                                      |  | Common Well #              |  | Specific Capacity<br>10                                                                                                                                                                                                                                                           |  |                           |  | <b>2. Well Type</b> Replacement                                       |  |                                                                |  | of previous unique well #                              |  | constructed in                                  |  |                    |  |          |  |
| Reason for replaced or reconstructed well ?<br>REPLACEMENT OF PLUGGED DR |  |                                                                      |  |                            |  |                                                                                                                                                                                                                                                                                   |  |                           |  |                                                                       |  |                                                                |  |                                                        |  |                                                 |  |                    |  |          |  |
| <b>3. Well serves</b> 1 # of                                             |  |                                                                      |  | Hicap Well ? No            |  |                                                                                                                                                                                                                                                                                   |  | Private, potable          |  |                                                                       |  | Hicap Property ? No                                            |  |                                                        |  |                                                 |  |                    |  |          |  |
| Heat Exchange ___ # of drillholes                                        |  |                                                                      |  | Hicap Potable ?            |  |                                                                                                                                                                                                                                                                                   |  | Construction Type Drilled |  |                                                                       |  |                                                                |  |                                                        |  |                                                 |  |                    |  |          |  |
| <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.) |  |
| 6                                                                        |  | Surface                                                              |  | 49                         |  | Rotary - Mud Circulation .....<br>Rotary - Air .....<br>Rotary - Air & Foam .....<br>Drill-Through Casing Hammer<br>Reverse Rotary<br>Cable-tool Bit ___ in. dia...<br>Dual Rotary .....<br>Temp. Outer Casing ___ in. dia<br>Removed? ___ depth ft. (If NO explain on back side) |  |                           |  |                                                                       |  |                                                                |  | I TOPSOIL                                              |  | Surface                                         |  | 1                  |  |          |  |
|                                                                          |  |                                                                      |  |                            |  |                                                                                                                                                                                                                                                                                   |  |                           |  |                                                                       |  |                                                                |  | Y SAND @ GRAVEL                                        |  | 1                                               |  | 18                 |  |          |  |
|                                                                          |  |                                                                      |  |                            |  |                                                                                                                                                                                                                                                                                   |  |                           |  |                                                                       |  |                                                                |  | C CLAY                                                 |  | 18                                              |  | 24                 |  |          |  |
|                                                                          |  |                                                                      |  |                            |  |                                                                                                                                                                                                                                                                                   |  |                           |  |                                                                       |  |                                                                |  | Y SAND @ GRAVEL                                        |  | 24                                              |  | 49                 |  |          |  |
| <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.)                  |  | 30.5 ft. below ground surface                                         |  |                                                                |  | 15 in. above grade                                     |  |                                                 |  |                    |  |          |  |
| 6                                                                        |  | NEW STEEL PE ASTM A53B SAWHILL 19 LB/FT                              |  |                            |  | Surface                                                                                                                                                                                                                                                                           |  | 49                        |  | <b>10. Pump Test</b>                                                  |  |                                                                |  | Developed ? Yes                                        |  |                                                 |  |                    |  |          |  |
| Dia. (in.)                                                               |  | Screen type, material & slot size                                    |  |                            |  | From (ft.)                                                                                                                                                                                                                                                                        |  | To (ft.)                  |  | Pumping level 32.5 ft. below surface                                  |  |                                                                |  | Disinfected ? Yes                                      |  |                                                 |  |                    |  |          |  |
|                                                                          |  |                                                                      |  |                            |  |                                                                                                                                                                                                                                                                                   |  |                           |  | Pumping at 20 GP M for 5 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                                                                   |  |                                                                      |  |                            |  |                                                                                                                                                                                                                                                                                   |  |                           |  |                                                                       |  |                                                                |  |                                                        |  |                                                 |  |                    |  |          |  |
| Kind of Sealing Material                                                 |  |                                                                      |  | From (ft.)                 |  | To (ft.)                                                                                                                                                                                                                                                                          |  | # Sacks Cement            |  | Filled & Sealed Well(s) as needed?                                    |  |                                                                |  | Yes                                                    |  |                                                 |  |                    |  |          |  |
| GRANULAR BENTONITE AS CASING D                                           |  |                                                                      |  | Surface                    |  | 0                                                                                                                                                                                                                                                                                 |  | 3 S                       |  |                                                                       |  |                                                                |  |                                                        |  |                                                 |  |                    |  |          |  |
| <b>13. Constructor / Supervisory Driller</b>                             |  |                                                                      |  |                            |  |                                                                                                                                                                                                                                                                                   |  |                           |  |                                                                       |  |                                                                |  | Lic #                                                  |  | Date Signed                                     |  |                    |  |          |  |
| JW                                                                       |  |                                                                      |  |                            |  |                                                                                                                                                                                                                                                                                   |  |                           |  |                                                                       |  |                                                                |  |                                                        |  | 07-06-1994                                      |  |                    |  |          |  |
| 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) |           | 63       | Building Overhang                |           | 9        |
| Building Drain - Sanitary                                 |           | 25       | Sewer - Building Sanitary        |           | 28       |
|                                                           |           |          | Septic or Holding, or POWTS Tank |           | 29       |

Comment:

Created On: 12-02-1994

Updated On: 06-18-2020

Review Status: