Well Construction Report
WISCONSIN UNIQUE WELL NUMBER HS722

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

Form 3300-077A

Property Owner: STEVENS, GARY			Phone #: (414)787-4611
Mailing Address: 2349 ELM ST			
City: WAUTOMA	State: WI	Zip Code: 54982	
County: Waushara	Co. Permit #:	Notification #:	Completed: 04-19-1995

Well Constructor (Business Name): ROBERT LEHR	Lic. #: 3013	Facility ID # (Public Wells):	
Address: PO BOX 36 WAUTOMA WI 54982-0036		Well Plan Approval #:	
		Approval Date (mm-dd-yyyy):	
Hicap Permanent Well #:	Common Well #:	Specific Capacity:	

1. Well Location

Fire # (if avail.): N2349			
Town of DAKOTA			
Street Address or Road Name and Number: N2349 ELM ST			
Subdivision Name:	Lot #:	Block #:	
Latitude / Longitude in Decimal Degree (DD): 44.0639 °N -89.2628 °W			Method Code: GCD013
SW NW or Govt Lot #:	Section: 1	Township: 18 N	Range: 10 E

2. Well Type Replacement

of previous unique well #: constructed in:

Reason for replaced or reconstructed well ?:

Construction Type: Driven Point

3. Well serves 1 # of

Private,potable

Heat Exchange____# of drillholes

Hicap Well ?

Hicap Property ?

Hicap Potable ?

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

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

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
1.25	GALY IRON	Surface	27
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)
1.25	STAINLESS STEEL 80 GA	27	30

9. Static Water Level

12 ft. below ground surface

10. Pump Test

Pumping level _____ ft. below surface

Pumping at _____ GP for _____ Hrs.

Pumping Method ?

11. Well Is

16 in. above grade

Developed ? Yes

Disinfected ? Yes

Capped ?

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
RL		04-19-1995
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
Collector Sewer - San or Storm		1	Sewer - Building Sanitary	>	68

Comment:

Created On: 02-14-1996 Updated On: 05-05-2020 Review Status: