Well Construction Report
WISCONSIN UNIQUE WELL NUMBER HS724

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

Form 3300-077A

Property Owner: DALTON, DON			Phone #
Mailing Address: 132 W HIGHLAND			
City: BURLINGTON	State: WI	Zip Code: 53105	
County: Waushara	Co. Permit #	Notification #	Completed: 08-21-1995

1. Well Location

Town of MT MORRIS

Fire # (if avail.)

Street Address or Road Name and Number

Subdivision Name	Lot #	Block #
PORTERS LAKE		

Well Constructor (Business Name)	Lic. #	Facility ID # (Public Wells)
ROBERT LEHR	3013	

Address: PO BOX 36
WAUTOMA WI 54982-0036

Well Plan Approval #

Approval Date (mm-dd-yyyy)

Latitude / Longitude in Decimal Degree (DD)				Method Code
44.09339 °N	-89.22634 °W			GPS008

SW	NW	Section	Township	Range
or Govt Lot #		29	19 N	11 E

2. Well Type Replacement

of previous unique well # constructed in

Reason for replaced or reconstructed well ?

OLD WELL PT WAS CLOGGED

Construction Type: Driven Point

Hicap Permanent Well #	Common Well #	Specific Capacity

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

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

6. Casing, Liner, Screen

Removed? ____depth ft. (If NO explain on back side)

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

7. Grout or Other Sealing Material

Method

8. Geology

Geology Codes				Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
		S		SAND	Surface	30

9. Static Water Level

13 ft. below ground surface

10. Pump Test

Pumping level _____ ft. below surface

Pumping at _____ GP for _____ Hrs.

Pumping Method ?

11. Well Is

12 in. above grade

Developed ?

Disinfected ? Yes

Capped ?

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? Yes

13. Constructor / Supervisory Driller	Lic #	Date Signed
RL		09-06-1995
Drill Rig Operator	Lic or Reg #	Date Signed

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

Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)	>	50

Type	Qualifier	Distance
Sewer - Building Sanitary	>	8
Septic or Holding, or POWTS Tank	>	25

Comment:

Created On: 02-14-1996 Updated On: 08-19-2022 Review Status: