

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				<input type="checkbox"/>		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A																					
Property Owner				Phone #		1. Well Location				Fire # (if avail.)																					
Mailing Address				City		State		Zip Code		Village of																					
County		Co. Permit #	Notification #		Completed		Street Address or Road Name and Number																								
Well Constructor (Business Name)				Lic. #	Facility ID # (Public Wells)		Latitude / Longitude in Decimal Degree (DD)		Method Code																						
Address				Well Plan Approval #		or Govt Lot #		Section	Township	Range																					
Hicap Permanent Well #		Common Well #		Specific Capacity		°N		°W		N																					
3. Well serves # of				Hicap Well ?		2. Well Type																									
Heat Exchange ___ # of drillholes				Hicap Property ?		of previous unique well # constructed in																									
				Hicap Potable ?		Reason for replaced or reconstructed well ?																									
4. Potential Contamination Sources - ON REVERSE SIDE				Construction Type																											
5. Drillhole Dimensions and Construction Method						8. Geology																									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">Upper Enlarged Drillhole</td> <td style="padding: 5px;">Lower Open Bedrock</td> </tr> <tr> <td style="padding: 5px;">Rotary - Mud Circulation</td> <td></td> </tr> <tr> <td style="padding: 5px;">Rotary - Air</td> <td></td> </tr> <tr> <td style="padding: 5px;">Rotary - Air & Foam</td> <td></td> </tr> <tr> <td style="padding: 5px;">Drill-Through Casing Hammer</td> <td></td> </tr> <tr> <td style="padding: 5px;">Reverse Rotary</td> <td></td> </tr> <tr> <td style="padding: 5px;">Cable-tool Bit ___in. dia...</td> <td></td> </tr> <tr> <td style="padding: 5px;">Dual Rotary</td> <td></td> </tr> <tr> <td style="padding: 5px;">Temp. Outer Casing ___in. dia</td> <td></td> </tr> <tr> <td colspan="2" style="padding: 5px;">Removed? ___depth ft. (If NO explain on back side)</td> </tr> </table>						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)							
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6. Casing, Liner, Screen				9. Static Water Level				11. Well Is																							
Dia. (in.)		Screen type, material & slot size		From (ft.)		To (ft.)		_____ ft. _____ground surface		_____ in. _____Grade																					
7. Grout or Other Sealing Material						10. Pump Test				Developed ?																					
Method						Pumping level _____ ft. below surface				Disinfected ?																					
						Pumping at _____ GP for _____ Hrs.				Capped ?																					
						Pumping Method ?																									
						12. Notified Owner of need to fill & seal ?																									
						Filled & Sealed Well(s) as needed?																									
13. Constructor / Supervisory Driller				Lic #		Date Signed																									
Drill Rig Operator				Lic or Reg #		Date Signed																									

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