Well Construction Report
WISCONSIN UNIQUE WELL NUMBER HV335

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

Form 3300-077A

Property Owner: JENSEN, DAVID		Phone #: (715)356-5324
Mailing Address: PO BOX 940		
City: MINOCQUA	State: WI	Zip Code: 54548

County	Co. Permit #	Notification #	Completed
Oneida			01-30-1995

Well Constructor (Business Name)	Lic. #	Facility ID # (Public Wells)
TERRENCE BECKLEY	353	

Address: 3107 BUS HWY 51 L
TOMAHAWK WI 54487-8838

Well Plan Approval #:

Approval Date (mm-dd-yyyy):

Hicap Permanent Well #	Common Well #	Specific Capacity
		0.9

3. Well serves 1 # of
Private,potable
Heat Exchange____# of drillholes

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

1. Well Location

Fire # (if avail.): 7729

Town of MINOCQUA

Street Address or Road Name and Number: BLUE LAKE ISLAND RD

Subdivision Name	Lot #	Block #

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

Method Code:

NW	SW	Section	Township	Range
or Govt Lot #	007	28	39 N	6 E

2. Well Type Replacement
of previous unique well # constructed in

Reason for replaced or reconstructed well ?
POINT PLUGGED

Construction Type: Drilled

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
6	Surface	119

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

Geology Codes	Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
Y	SAND @ GRAVEL	Surface	119

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	P E 18 97 LBS PER FOOT ASTM A53 SAWHILL USA	Surface	116
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
6	NOM STAINLESS STEEL 12 X 3	116	119

7. Grout or Other Sealing Material

Method NONE

9. Static Water Level
53 ft. below ground surface

10. Pump Test
Pumping level 65 ft. below surface
Pumping at 11 GP M for 20 Hrs.
Pumping Method ?

11. Well Is
15 in. above grade
Developed ? Yes
Disinfected ? Yes
Capped ? Yes

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? Yes

13. Constructor / Supervisory Driller	Lic #	Date Signed
TB		02-02-1995
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)		55
Building Drain - Sanitary		40

Type	Qualifier	Distance
Building Overhang		4
Sewer - Building Sanitary		40
Septic or Holding, or POWTS Tank		69

Comment:

Created On: 11-20-1995 Updated On: 11-20-1995 Review Status: