

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				HW030		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A							
Property Owner PETKOFF, MICHAEL						Phone #		1. Well Location				Fire # (if avail.)					
Mailing Address 4204 ORANGE ST						Town of STRONYS PRAIRIE						1854					
City DELAVAN						State WI		Zip Code 53115				Street Address or Road Name and Number					
County Adams						Co. Permit #		Notification #		Completed 10-12-1994		Subdivision Name ROCHE A CRI		Lot # 2		Block #	
Well Constructor (Business Name) DOLATA EXCAVATING @ WELL						Lic. # 4709		Facility ID # (Public Wells)		Latitude / Longitude in Decimal Degree (DD)				Method Code			
Address 2543 HWY 13 ADAMS WI 53910-9801						Well Plan Approval #		Approval Date (mm-dd-yyyy)		°N		°W		Range			
										NE SE		Section 34				Township 18 N	
Hicap Permanent Well #						Common Well #		Specific Capacity 1		2. Well Type Replacement							
Heat Exchange ___ # of drillholes						Hicap Well ? No		Hicap Property ? No		Reason for replaced or reconstructed well ?							
Private, potable						Hicap Potable ?		NO LONGER PRODUCING									
3. Well serves 1 # of						Hicap Well ? No		Hicap Property ? No		Construction Type Jetted							
4. Potential Contamination Sources - ON REVERSE SIDE																	
5. Drillhole Dimensions and Construction Method																	
Dia. (in.) From (ft.) To (ft.)			Upper Enlarged Drillhole Lower Open Bedrock														
2 Surface 49			Rotary - Mud Circulation														
1.25 49 51			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																	
Dia. (in.) From (ft.) To (ft.)			Geology Codes			Type, Caving/Noncaving, Color, Hardness, etc...			From (ft.) To (ft.)								
2 Surface 49			T S			BROWN SAND			Surface 25								
1.25 49 51			A Y			WHITE COARSE SAND MIXED WITH GRAVEL			25 51								
6. Casing, Liner, Screen																	
Dia. (in.)			Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.) To (ft.)		9. Static Water Level								
2			GALV RDBZ THREADED @ COUPLED ASTM A 53 589 SAWHILL				Surface 49		30 ft. below ground surface								
Dia. (in.)			Screen type, material & slot size				From (ft.) To (ft.)		10. Pump Test								
1.25			CLAYTON MARK FISH PT				49 51		Pumping level 40 ft. below surface								
									Pumping at 10 GP M for 2 Hrs.								
									Pumping Method ?								
7. Grout or Other Sealing Material																	
Method																	
11. Well Is																	
12 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														
KW			10-26-1994														
Drill Rig Operator			Lic or Reg #														
JD			Date Signed														
			10-26-1994														

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		54	Building Overhang		5
			Septic or Holding, or POWTS Tank		49

Comment:

Created On: 01-31-1995

Updated On: 01-31-1995

Review Status: