

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				IK168		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A																			
Property Owner VAN CAMP, GARY						Phone # (920)749-0169		1. Well Location				Fire # (if avail.)																	
Mailing Address W5031 WEGE RD								Town of BREED				10435																	
City APPLETON						State WI		Zip Code 54915				Street Address or Road Name and Number 10435 PESHTIGO BROOK RD																	
County Oconto		Co. Permit #		Notification #		Completed 11-07-1997		Subdivision Name				Lot # Block #																	
Well Constructor (Business Name) EDWIN LEFEBER				Lic. # 608		Facility ID # (Public Wells)		Latitude / Longitude in Decimal Degree (DD) 45.0553 °N -88.3646 °W				Method Code GCD013																	
Address 14809 BEAR PAW TRL MOUNTAIN WI 54149-9594				Well Plan Approval #		NE NE Section Township Range or Govt Lot # 25 30 N 17 E		2. Well Type New Well of previous unique well # constructed in Reason for replaced or reconstructed well ? NEW HOME Construction Type Driven Point																					
				Approval Date (mm-dd-yyyy)																									
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																													
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Upper Enlarged Drillhole</td> <td style="width: 50%;">Lower Open Bedrock</td> </tr> <tr> <td>Rotary - Mud Circulation</td> <td></td> </tr> <tr> <td>Rotary - Air</td> <td></td> </tr> <tr> <td>Rotary - Air & Foam</td> <td></td> </tr> <tr> <td>Drill-Through Casing Hammer</td> <td></td> </tr> <tr> <td>Reverse Rotary</td> <td></td> </tr> <tr> <td>Cable-tool Bit ___ in. dia...</td> <td></td> </tr> <tr> <td>Dual Rotary</td> <td></td> </tr> <tr> <td>Temp. Outer Casing ___ in. dia</td> <td></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	
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6. Casing, Liner, Screen																													
Removed? ___ depth ft. (If NO explain on back side)																													
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7. Grout or Other Sealing Material Method																													
9. Static Water Level																													
13 ft. below ground surface																													
10. Pump Test																													
Pumping level 13 ft. below surface Pumping at 7 GP M for 1 Hrs. Pumping Method ?																													
11. Well Is																													
18 in. above grade Developed ? Yes Disinfected ? Yes Capped ? Yes																													
12. Notified Owner of need to fill & seal ?																													
Filled & Sealed Well(s) as needed? NONE																													
13. Constructor / Supervisory Driller																													
EL Lic # Date Signed 11-07-1997																													
Drill Rig Operator																													
LL Lic or Reg # Date Signed 11-07-1997																													

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		75	Building Overhang		2
			Septic or Holding, or POWTS Tank		45

Comment:

Created On: 02-09-1998

Updated On: 11-15-2019

Review Status: