

|                                                                                                    |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  |                    |  |                                                       |  |            |  |
|----------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------|--|-------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------|--|--------------------|--|-------------------------------------------------------|--|------------|--|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b>                             |  |                                                                      |  | <b>KX811</b>                                                      |  | <b>Drinking Water and Groundwater - DG/5</b><br><b>Department of Natural Resources, Box 7921</b><br><b>Madison WI 53707</b>                                                                                                                                                       |  |                                                                       |  | Form 3300-077A     |  |                                                       |  |            |  |
| Property Owner PAULSON, CRAIG                                                                      |  |                                                                      |  |                                                                   |  | Phone # (715)251-1156                                                                                                                                                                                                                                                             |  | <b>1. Well Location</b>                                               |  |                    |  | Fire # (if avail.)                                    |  |            |  |
| Mailing Address W7150 HWY 8                                                                        |  |                                                                      |  |                                                                   |  | Town of NIAGARA                                                                                                                                                                                                                                                                   |  |                                                                       |  |                    |  | W7150                                                 |  |            |  |
| City NIAGARA                                                                                       |  |                                                                      |  |                                                                   |  | State WI                                                                                                                                                                                                                                                                          |  | Zip Code 54151                                                        |  |                    |  | Street Address or Road Name and Number<br>W7150 HWY 8 |  |            |  |
| County Marinette                                                                                   |  | Co. Permit #                                                         |  | Notification #                                                    |  | Completed 07-01-1996                                                                                                                                                                                                                                                              |  | Subdivision Name                                                      |  |                    |  | Lot #<br>Block #                                      |  |            |  |
| Well Constructor (Business Name)<br>MAURICE JOHNSON                                                |  |                                                                      |  | Lic. # 664                                                        |  | Facility ID # (Public Wells)                                                                                                                                                                                                                                                      |  | Latitude / Longitude in Decimal Degree (DD)<br>45.7482 °N -87.9464 °W |  |                    |  | Method Code<br>GCD013                                 |  |            |  |
| Address N19382 CO O<br>PEMBINE WI 54156-9801                                                       |  |                                                                      |  | Well Plan Approval #                                              |  | Approval Date (mm-dd-yyyy)                                                                                                                                                                                                                                                        |  | SE NW                                                                 |  | Section 24         |  | Township 38 N                                         |  | Range 20 E |  |
|                                                                                                    |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  | or Govt Lot #                                                         |  |                    |  |                                                       |  |            |  |
| Hicap Permanent Well #                                                                             |  |                                                                      |  | Common Well #                                                     |  | Specific Capacity<br>0.1                                                                                                                                                                                                                                                          |  | <b>2. Well Type</b> New Well                                          |  |                    |  |                                                       |  |            |  |
| <b>3. Well serves</b> 1 # of HOME<br><br>Private, potable<br><br>Heat Exchange ___ # of drillholes |  |                                                                      |  | Hicap Well ? No<br><br>Hicap Property ? No<br><br>Hicap Potable ? |  | Reason for replaced or reconstructed well ?<br><br>UPGRADE HOME                                                                                                                                                                                                                   |  |                                                                       |  |                    |  |                                                       |  |            |  |
|                                                                                                    |  |                                                                      |  |                                                                   |  | Construction Type Drilled                                                                                                                                                                                                                                                         |  |                                                                       |  |                    |  |                                                       |  |            |  |
| <b>4. Potential Contamination Sources - ON REVERSE SIDE</b>                                        |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  |                    |  |                                                       |  |            |  |
| <b>5. Drillhole Dimensions and Construction Method</b>                                             |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  |                    |  |                                                       |  |            |  |
| Dia. (in.)                                                                                         |  | From (ft.)                                                           |  | To (ft.)                                                          |  | Upper Enlarged Drillhole                                                                                                                                                                                                                                                          |  |                                                                       |  | Lower Open Bedrock |  |                                                       |  |            |  |
| 6                                                                                                  |  | Surface                                                              |  | 300                                                               |  | Rotary - Mud Circulation .....<br>Rotary - Air .....<br>Rotary - Air & Foam .....<br>Drill-Through Casing Hammer<br>Reverse Rotary<br>Cable-tool Bit ___ in. dia...<br>Dual Rotary .....<br>Temp. Outer Casing ___ in. dia<br>Removed? ___ depth ft. (If NO explain on back side) |  |                                                                       |  |                    |  |                                                       |  |            |  |
| <b>8. Geology</b>                                                                                  |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  |                    |  |                                                       |  |            |  |
| Geology Codes                                                                                      |  |                                                                      |  | Type, Caving/Noncaving, Color, Hardness, etc...                   |  |                                                                                                                                                                                                                                                                                   |  | From (ft.)                                                            |  | To (ft.)           |  |                                                       |  |            |  |
|                                                                                                    |  | Q Y                                                                  |  | SAND GRAVEL CAVING                                                |  |                                                                                                                                                                                                                                                                                   |  | Surface                                                               |  | 26                 |  |                                                       |  |            |  |
|                                                                                                    |  | Z                                                                    |  | CLAY GRAVEL                                                       |  |                                                                                                                                                                                                                                                                                   |  | 26                                                                    |  | 58                 |  |                                                       |  |            |  |
| G                                                                                                  |  | Q                                                                    |  | GREY GRANITE                                                      |  |                                                                                                                                                                                                                                                                                   |  | 58                                                                    |  | 300                |  |                                                       |  |            |  |
| <b>6. Casing, Liner, Screen</b>                                                                    |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  |                    |  |                                                       |  |            |  |
| Dia. (in.)                                                                                         |  | Material, Weight, Specification<br>Manufacturer & Method of Assembly |  |                                                                   |  | From (ft.)                                                                                                                                                                                                                                                                        |  | To (ft.)                                                              |  |                    |  |                                                       |  |            |  |
| 6                                                                                                  |  | ASTM A53B SAWHILL 280 W 18 97 LB FT WELDED                           |  |                                                                   |  | Surface                                                                                                                                                                                                                                                                           |  | 58                                                                    |  |                    |  |                                                       |  |            |  |
| Dia. (in.)                                                                                         |  | Screen type, material & slot size                                    |  |                                                                   |  | From (ft.)                                                                                                                                                                                                                                                                        |  | To (ft.)                                                              |  |                    |  |                                                       |  |            |  |
|                                                                                                    |  | NOT INSTALLED                                                        |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  |                    |  |                                                       |  |            |  |
| <b>9. Static Water Level</b>                                                                       |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  |                    |  |                                                       |  |            |  |
| 14 ft. below ground surface                                                                        |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  | <b>11. Well Is</b> |  |                                                       |  |            |  |
| <b>10. Pump Test</b>                                                                               |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  | 18 in. above grade |  |                                                       |  |            |  |
| Pumping level 40 ft. below surface                                                                 |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  | Developed ? Yes    |  |                                                       |  |            |  |
| Pumping at 2 GP M for 48 Hrs.                                                                      |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  | Disinfected ? Yes  |  |                                                       |  |            |  |
| Pumping Method ?                                                                                   |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  | Capped ? Yes       |  |                                                       |  |            |  |
| <b>7. Grout or Other Sealing Material</b>                                                          |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  |                    |  |                                                       |  |            |  |
| Method MOUNDED BENTONITE                                                                           |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  |                    |  |                                                       |  |            |  |
| Kind of Sealing Material                                                                           |  |                                                                      |  | From (ft.)                                                        |  | To (ft.)                                                                                                                                                                                                                                                                          |  | # Sacks Cement                                                        |  |                    |  |                                                       |  |            |  |
| GRAN BENTONITE                                                                                     |  |                                                                      |  | Surface                                                           |  | 58                                                                                                                                                                                                                                                                                |  | 3 S                                                                   |  |                    |  |                                                       |  |            |  |
| <b>12. Notified Owner of need to fill &amp; seal ?</b>                                             |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  |                    |  |                                                       |  |            |  |
| Filled & Sealed Well(s) as needed? No                                                              |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  |                    |  |                                                       |  |            |  |
| CUSTOMER IS USING NON PORTABLE                                                                     |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  |                    |  |                                                       |  |            |  |
| <b>13. Constructor / Supervisory Driller</b>                                                       |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  | Lic #              |  | Date Signed                                           |  |            |  |
| MJ                                                                                                 |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  |                    |  | 07-09-1996                                            |  |            |  |
| Drill Rig Operator                                                                                 |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  | Lic or Reg #       |  | Date Signed                                           |  |            |  |
| DJM                                                                                                |  |                                                                      |  |                                                                   |  |                                                                                                                                                                                                                                                                                   |  |                                                                       |  |                    |  | 07-05-1996                                            |  |            |  |

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

| Type                                                      | Qualifier | Distance | Type                             | Qualifier | Distance |
|-----------------------------------------------------------|-----------|----------|----------------------------------|-----------|----------|
| POWTS dispersal component (soil absorption unit or mound) |           | 75       | Building Overhang                |           | 27       |
| Building Drain - Sanitary                                 |           | 60       | Sewer - Building Sanitary        |           | 61       |
|                                                           |           |          | Septic or Holding, or POWTS Tank |           | 63       |

Comment:

Created On: 07-26-1996

Updated On: 10-22-2019

Review Status: