Well Construction Report
WISCONSIN UNIQUE WELL NUMBER KZ100

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

Form 3300-077A

Property Owner: SEBEK, CATHRINE	Phone #: (715)634-3667
Mailing Address: 10839 N NYMAN AVE	
City: HAYWARD	State: WI — Zip Code: 54843
County: Sawyer	Co. Permit #: — Notification #: — Completed: 06-29-1998
Well Constructor (Business Name): FROEMEL WELL @ PUMP REPAIR INC	Lic. #: 6080 — Facility ID # (Public Wells):
Address: RT 5 BOX 5000 F HAYWARD WI 54843	Well Plan Approval #: — Approval Date (mm-dd-yyyy):
Hicap Permanent Well #:	Common Well #: — Specific Capacity:

1. Well Location

Town of HAYWARD				Fire # (if avail.): 10839
Street Address or Road Name and Number: NYMAND RD				
Subdivision Name:	Lot #:	Block #:		
Latitude / Longitude in Decimal Degree (DD): 46.0248 °N -91.4888 °W				Method Code: GCD013
NE NE or Govt Lot #	Section: 21	Township: 41 N	Range: 9 W	

2. Well Type Replacement

of previous unique well # — constructed in

Reason for replaced or reconstructed well ?: OLD WELL FAILED

Construction Type: Driven Point

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

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	

6. Casing, Liner, Screen — Removed? ____depth ft. (If NO explain on back side)

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
2	R@D T@C GALV STEEL	Surface	33
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
2	CAMBLE 60#	33	36

7. Grout or Other Sealing Material

Method

8. Geology

Geology Codes				Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
		S		SAND	Surface	36

9. Static Water Level

7 ft. below ground surface

10. Pump Test

Pumping level 7 ft. below surface

Pumping at 8 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? No

OWNER

13. Constructor / Supervisory Driller	Lic #	Date Signed
DF		06-29-1998
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)		65

Type	Qualifier	Distance
Building Overhang		6
Septic or Holding, or POWTS Tank		45

Comment:

Created On: 09-11-1998 Updated On: 06-24-2020 Review Status: