Well Construction Report
WISCONSIN UNIQUE WELL NUMBER LG358

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

Form 3300-077A

Property Owner: BUSS, DENNIS	Phone #: (715)289-3486
Mailing Address: 25766 30TH AVE	
City: CADOTT	State: WI — Zip Code: 54727
County: Chippewa	Co. Permit #: W19849 — Notification #: — Completed: 11-19-1997
Well Constructor (Business Name): MIKE PEAK	Lic. #: 6410 — Facility ID # (Public Wells):
Address: S 325 CO RD N, AUGUSTA WI 54722	Well Plan Approval #: — Approval Date (mm-dd-yyyy):
Hicap Permanent Well #:	Common Well #: — Specific Capacity: 1.3

1. Well Location

Fire # (if avail.):

Town of SIGEL

Street Address or Road Name and Number: SAME

Subdivision Name: — Lot #: — Block #:

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

or Govt Lot #		Section	Township	Range
SE	SE	19	28 N	6 W

2. Well Type Replacement

of previous unique well #: — constructed in:

Reason for replaced or reconstructed well ?: REPLACE POINT WELL IN BAS

Construction Type: Drilled

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

Dia. (in.)	From (ft.)	To (ft.)
6	Surface	35.5

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.)
	Q	S		YELLOW CAVING MED SAND	Surface	22
Y		Y		MED YELLOW SAND @ GRAVEL	22	39

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	STEEL 18 97 A53B US SAWHILL PE WELDED	Surface	35.5
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
4	COOK STAINLESS 10 SLOT	35.5	39

9. Static Water Level

6 ft. below ground surface

10. Pump Test

Pumping level 15 ft. below surface

Pumping at 12 GP M for 2 Hrs.

Pumping Method ?

11. Well Is

18 in. above grade

Developed ? Yes

Disinfected ? Yes

Capped ? Yes

7. Grout or Other Sealing Material

Method

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? No

PUMP INSTALLER TO DO

13. Constructor / Supervisory Driller	Lic #	Date Signed
MP		12-22-1997
Drill Rig Operator	**Lic or Reg #**	**Date Signed**

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Drain - Sanitary		25	Sewer - Building Sanitary		40
Building Overhang		15	Septic or Holding, or POWTS Tank		50

Comment:

Created On: 03-11-1998 Updated On: 03-11-1998 Review Status: