Well Construction Report
WISCONSIN UNIQUE WELL NUMBER LK018

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

Form 3300-077A

Property Owner: KNIGHTSBRIDGE HOME LTD, ROGGE,		Phone #: (414)238-0138	
Mailing Address: 10911 N KNIGHTSBRIDG			
City: MEQUON	State: WI	Zip Code: 53092	
County: Ozaukee	Co. Permit #:	Notification #:	Completed: 04-30-1998

1. Well Location

City of MEQUON

Fire # (if avail.)

Street Address or Road Name and Number: 8143 W KNIGHTSBRIDGE DR

Subdivision Name	Lot #	Block #
KNIGHTSBRIDGE CROSSING	13	

Well Constructor (Business Name)	Lic. #	Facility ID # (Public Wells)
MUNICIPAL WELL @ PUMP INC	13	

Latitude / Longitude in Decimal Degree (DD): 43.2193 °N -88.011 °W

Method Code: GCD013

Well Plan Approval #:

NW or Govt Lot #	NE	Section	Township	Range
		28	9 N	21 E

Address: 20950 ENTERPRISE AVE
BROOKFIELD WI 53045-5224

Approval Date (mm-dd-yyyy):

2. Well Type New Well

of previous unique well # constructed in

Hicap Permanent Well #	Common Well #	Specific Capacity

Reason for replaced or reconstructed well ?

3. Well serves 1 # of

Private,potable

Heat Exchange____# of drillholes

Hicap Well ? No

Hicap Property ? No

Hicap Potable ?

Construction Type: Drilled

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
8.875	Surface	165
6	165	300

Upper Enlarged Drillhole / Lower Open Bedrock

Yes Rotary - Mud Circulation .....
Rotary - Air .....
Rotary - Air & Foam .....
Drill-Through Casing Hammer
Reverse Rotary
Cable-tool Bit ____in. dia...
Dual Rotary .....
Yes Temp. Outer Casing 10in. dia
Yes Removed? ____depth ft. (If NO explain on back side)

8. Geology

Geology Codes				Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
		Z		CLAY @ GRAVEL	Surface	10
		C		CLAY	10	43
		Y		SAND W GRAVEL	43	45
		C		CLAY	45	57
		Y		SAND W GRAVEL	57	61
		C		CLAY	61	146
	B	L	G	BROKEN LIME W GRAVEL	146	163
		L		LIMESTONE	163	300

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	ASTMA53 GR B 18 97# FT 0 280 WALL PE BEVELED FORWLD ISPCO MFG	Surface	165
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)

9. Static Water Level

64 ft. below ground surface

10. Pump Test

Pumping level _____ ft. below surface

Pumping at 10 GP M for 1 Hrs.

Pumping Method ?

11. Well Is

18 in. above grade

Developed ? Yes

Disinfected ? Yes

Capped ? Yes

7. Grout or Other Sealing Material

Method GRAVITY

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
BENTONITE CUTTING SLURRY	Surface	165	

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? No

NONE ON SITE

13. Constructor / Supervisory Driller	Lic #	Date Signed
TG		05-15-1998
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
RW		05-15-1998

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Overhang		15	Collector Sewer - San or Storm		25

Comment:

Created On: 11-02-1998 Updated On: 07-15-2019 Review Status: