

<b>Well Construction Report</b> <b>WISCONSIN UNIQUE WELL NUMBER</b>				<b>LN116</b>		<b>Drinking Water and Groundwater - DG/5</b> Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A	
Property Owner BLOCK, RANDALL				Phone # (715)355-8792		<b>1. Well Location</b>				Fire # (if avail.)	
Mailing Address 2776 E BITTERSWEET C						Town of MOSINEE					
City WAUSAU				State WI	Zip Code 54401	Street Address or Road Name and Number					
E BITTERSWEET CT WAUSAU WI						Subdivision Name		Lot #	Block #		
County Marathon	Co. Permit #	Notification #	Completed 04-29-1997		RIVER WOODLANDS		18				
Well Constructor (Business Name)			Lic. #	Facility ID # (Public Wells)		Latitude / Longitude in Decimal Degree (DD)		Method Code			
LANG WELL DRILLING CO INC			4594			°N °W					
Address 1710 W GARFIELD AVE WAUSAU WI 54401-5299			Well Plan Approval #		NE	NW	Section	Township	Range		
			Approval Date (mm-dd-yyyy)		or Govt Lot #	3	27 N	7 E			
Hicap Permanent Well #		Common Well #	Specific Capacity		<b>2. Well Type</b> New Well				of previous unique well # constructed in		
					Reason for replaced or reconstructed well ?				FUTURE HOME		
<b>3. Well serves</b> 1 # of			Hicap Well ? No		Construction Type Drilled						
Private, potable			Hicap Property ? No								
Heat Exchange ___ # of drillholes			Hicap Potable ?								
<b>4. Potential Contamination Sources - ON REVERSE SIDE</b>											
<b>5. Drillhole Dimensions and Construction Method</b>						<b>8. Geology</b>					
Dia. (in.)	From (ft.)	To (ft.)	Upper Enlarged Drillhole		Lower Open Bedrock	Geology Codes		Type, Caving/Noncaving, Color, Hardness, etc...		From (ft.)	To (ft.)
10	Surface	9	Rotary - Mud Circulation .....			C	G	CLAY @ LOOSE ROCK		Surface	7
8	9	40	<u>Yes</u> Rotary - Air .....			G	Q	GREY GRANITE		7	240
6	40	240	Rotary - Air & Foam .....								
			Drill-Through Casing Hammer								
			Reverse Rotary								
			Cable-tool Bit ___ in. dia...								
			Dual Rotary .....								
			<u>Yes</u> Temp. Outer Casing 8in. dia								
			<u>Yes</u> Removed? ___ depth ft. (If NO explain on back side)								
<b>6. Casing, Liner, Screen</b>						<b>9. Static Water Level</b>			<b>11. Well Is</b>		
Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly			From (ft.)	To (ft.)	26 ft. below ground surface			26 in. above grade		
6	IPSCO USA ASTM A53B ASME SA53 E 6 625 X 280 WALLPRESSURE TESTED 1780 PSI PLAIN END STEEL PIPE			Surface	40	<b>10. Pump Test</b>			Developed ? Yes		
						Pumping level 220 ft. below surface			Disinfected ? Yes		
						Pumping at 1 GP M for 0.5 Hrs.			Capped ? Yes		
Dia. (in.)	Screen type, material & slot size			From (ft.)	To (ft.)	Pumping Method ?					
						<b>12. Notified Owner of need to fill &amp; seal ?</b>					
						Filled & Sealed Well(s) as needed?					
						NOT APPLICABLE					
<b>7. Grout or Other Sealing Material</b>						<b>13. Constructor / Supervisory Driller</b>		Lic #	Date Signed		
Method BRADEN HEAD						RL			05-01-1997		
Kind of Sealing Material		From (ft.)	To (ft.)	# Sacks Cement		Drill Rig Operator		Lic or Reg #	Date Signed		
NEAT CEMENT GRO		Surface	40	9 S							

**4a. Potential Contamination Sources**

Is the well located in floodplain ? No

Comment:

Created On: 06-12-1997

Updated On: 06-12-1997

Review Status: