

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				LU269		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A							
Property Owner NEWMAN, MIKE						Phone # (715)277-5162		1. Well Location				Fire # (if avail.) 6388					
Mailing Address 6388 RIVER RD						Town of PINE LAKE						Street Address or Road Name and Number 6388 RIVER RD					
City RHINELANDER				State WI		Zip Code 54501		Subdivision Name				Lot #		Block #			
County Oneida		Co. Permit #		Notification #		Completed 04-19-2000		Latitude / Longitude in Decimal Degree (DD) °N °W				Method Code					
Well Constructor (Business Name) JOHN A GABRIEL				Lic. # 6154		Facility ID # (Public Wells)		SW		SW		Section 3		Township 37 N		Range 8 E	
Address 3860 CHAIN O'LAKES RD EAGLE RIVER WI 54521				Well Plan Approval #		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 18 # of						Hicap Well ? No		Construction Type Driven Point									
Private, potable						Hicap Property ? No											
Heat Exchange ____ # of drillholes						Hicap Potable ?											
4. Potential Contamination Sources - ON REVERSE SIDE																	
5. Drillhole Dimensions and Construction Method																	
Upper Enlarged Drillhole 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 Lower Open Bedrock																	
8. Geology																	
Geology Codes				Type, Caving/Noncaving, Color, Hardness, etc...				From (ft.)		To (ft.)							
Y				SAND/GRAVEL				Surface		30							
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		GALVANIZED R & D				Surface		26									
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)									
2		SS248-60 CAMPBELL				26		30									
7. Grout or Other Sealing Material																	
Method																	
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement									
				Surface													
9. Static Water Level																	
14 ft. below ground surface																	
10. Pump Test																	
Pumping level ____ ft. below surface																	
Pumping at ____ GP for ____ Hrs.																	
Pumping Method ?																	
11. Well Is																	
20 in. above grade																	
Developed ? Yes																	
Disinfected ? Yes																	
Capped ? Yes																	
12. Notified Owner of need to fill & seal ?																	
Filled & Sealed Well(s) as needed?																	
Yes																	
13. Constructor / Supervisory Driller																	
JAG				Lic #				Date Signed									
								04-20-2000									
Drill Rig Operator				Lic or Reg #				Date Signed									

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Overhang		2	Septic or Holding, or POWTS Tank		35
			POWTS dispersal component (soil absorption unit or mound)		58

Comment:

Created On: 05-10-2000

Updated On: 05-17-2000

Review Status: