Well Construction Report
WISCONSIN UNIQUE WELL NUMBER LW549

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

Form 3300-077A

Property Owner: KELL, TOM			Phone #: (715)635-6240
Mailing Address: 329 S RIVER RD			
City: SPOONER	State: WI	Zip Code: 54801	
County: Washburn	Co. Permit #:	Notification #:	Completed: 11-02-1998

Well Constructor (Business Name): JAMES C LINDSTROM	Lic. #: 101	Facility ID # (Public Wells):	
Address: 105 BALSAM ST SPOONER WI 54801-9438		Well Plan Approval #:	
		Approval Date (mm-dd-yyyy):	
Hicap Permanent Well #:	Common Well #	Specific Capacity: 1.4	

1. Well Location

Town of SPOONER

Fire # (if avail.)

Street Address or Road Name and Number

Subdivision Name	Lot #	Block #	
Latitude / Longitude in Decimal Degree (DD): °N °W			Method Code
NE SE or Govt Lot #:	Section: 27	Township: 39 N	Range: 12 W

2. Well Type Replacement

of previous unique well # constructed in

Reason for replaced or reconstructed well ?

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.)
4	Surface	56

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		BROWN CAVING SAND	Surface	22
T		Y		BROWN SAND & GRAVEL	22	41
Y		S		YELLOW SAND	41	56

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
4	ASTM A53B T&C .237 WALL 2210 PSI VICTORY STEEL	Surface	52
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)
4	STAINLESS #10	52	56

9. Static Water Level

15 ft. below ground surface

10. Pump Test

Pumping level 26 ft. below surface

Pumping at 15 GP M for 24 Hrs.

Pumping Method ?

11. Well Is

18 in. above grade

Developed ? Yes

Disinfected ? Yes

Capped ? Yes

7. Grout or Other Sealing Material

Method

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
	Surface		

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed?

13. Constructor / Supervisory Driller	Lic #	Date Signed
CPL		11-04-1998
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
EJL		11-04-1998

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		60	Building Overhang		12
			Septic or Holding, or POWTS Tank		50

Comment:

Created On: 10-20-1999 Updated On: 10-20-1999 Review Status: