

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				MC074		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A															
Property Owner STONER, GLADYS						Phone # (937)399-3890		1. Well Location				Fire # (if avail.)													
Mailing Address 311 LINWOOD						Village of PARK RIDGE						Street Address or Road Name and Number 311 LINWOOD AVE													
City STEVENS POINT				State WI		Zip Code 54481																			
County		Co. Permit #		Notification #		Completed 05-08-1998		Subdivision Name				Lot #		Block #											
Well Constructor (Business Name) CHETS PLBG @ HTG INC						Lic. # 4832		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD) °N °W				Method Code									
Address 5009 COYE DR STEVENS POINT WI 54481-5001						Well Plan Approval #				SE		NW		Section 34		Township 24 N		Range 8 E							
						Approval Date (mm-dd-yyyy)				or Govt Lot #		34		24 N		8 E									
Hicap Permanent Well #				Common Well #		Specific Capacity				2. Well Type New Well YR399 replaces this well of previous unique well # constructed in															
3. Well serves 1 # of Private, potable Heat Exchange ___ # of drillholes						Hicap Well ? No				Reason for replaced or reconstructed well ? OLD WELL IN BASEMENT															
						Hicap Property ? No																			
						Hicap Potable ?																			
Construction Type Driven Point																									
4. Potential Contamination Sources - ON REVERSE SIDE																									
5. Drillhole Dimensions and Construction Method																									
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6. Casing, Liner, Screen																									
Removed? ___ depth ft. (If NO explain on back side)																									
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7. Grout or Other Sealing Material Method																									
9. Static Water Level 26 ft. below ground surface																									
10. Pump Test Pumping level 5 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																									
12. Notified Owner of need to fill & seal ? Filled & Sealed Well(s) as needed? Yes																									
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4a. Potential Contamination SourcesIs the well located in floodplain ? No

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Drain - Sanitary		8	Downspout/Yard Hydrant		11
Building Overhang		2	Sewer - Building Sanitary		10

Comment:

Abandonment Type	Abandonment Date	Procedure	Reason
	03/15/2017	NEAT CEMENT 0-40' 1 SACK	POINT FAILED

Created On: 07-02-1998

Updated On: 04-19-2017

Review Status: