Well Construction Report
WISCONSIN UNIQUE WELL NUMBER MF172

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

Form 3300-077A

Property Owner: CHRZANOWSKI, JIM	Phone #: (414)677-9117
Mailing Address: W200 N16445 PINE DR	
City: JACKSON	State: WI — Zip Code: 53037
County: Marinette	Co. Permit #: — Notification #: — Completed: 08-21-1998
Well Constructor (Business Name): MORIN@JOHNSON WELL DRILLING	Lic. #: 6317 — Facility ID # (Public Wells):
Address: W8855 PROVENCHER RD NIAGARA WI 54151	Well Plan Approval #: — Approval Date (mm-dd-yyyy):
Hicap Permanent Well #:	Common Well #: — Specific Capacity: 1.7

1. Well Location

Town of STEPHENSON

Fire # (if avail.):

Street Address or Road Name and Number: DOE TRL

Subdivision Name: — Lot #: — Block #:

Latitude / Longitude in Decimal Degree (DD): °N °W — Method Code:

SE	SE	Section	Township	Range
or Govt Lot #		8	33 N	19 E

2. Well Type New Well

of previous unique well #: — constructed in:

Reason for replaced or reconstructed well ?

Construction Type: Drilled

3. Well serves # 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.)
6	Surface	70

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	G	G	GRAVEL STONES CAVING	Surface	15
M	S		SAND CLEAN MEDIUM	15	70

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	ASTM A53B SAWHILL 280 W 18 97 LB FT WELDED	Surface	64
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
6	#12 6 FT TELESCOPING	64	70

9. Static Water Level

50 ft. below ground surface

10. Pump Test

Pumping level 56 ft. below surface

Pumping at 10 GP M for 2 Hrs.

Pumping Method ?

11. Well Is

18 in. above grade

Developed ? Yes

Disinfected ? Yes

Capped ? Yes

7. Grout or Other Sealing Material

Method

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed?

13. Constructor / Supervisory Driller	Lic #	Date Signed
MJ		08-24-1998
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
DJ		08-24-1998

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Drain - Sanitary		50	Sewer - Building Sanitary		50
Building Overhang		20	Septic or Holding, or POWTS Tank	>	80

Comment:

Created On: 09-17-1998 Updated On: 09-17-1998 Review Status: