

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				MJ024		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A									
Property Owner BOTTOM, TOM						Phone #													
Mailing Address 13340 W OAK CT						Town of LINCOLN						Fire # (if avail.) 5247							
City LOCKPORT						State IL		Zip Code 60441				Street Address or Road Name and Number 5247 ILLINOIS ST							
County Vilas		Co. Permit #		Notification #		Completed 12-10-2001		Subdivision Name				Lot # Block #							
Well Constructor (Business Name) KLISS PLBG HTG & SEPTIC SERV INC				Lic. # 6341		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD) 45.9203 °N -89.2899 °W				Method Code GCD013					
Address 1030 HWY 455 EAGLE RIVER WI 54521				Well Plan Approval #				NW SE		Section Township		Range							
				Approval Date (mm-dd-yyyy)				or Govt Lot # 7		30 40 N		10 E							
Hicap Permanent Well #				Common Well #		Specific Capacity				2. Well Type Replacement of previous unique well # constructed in									
3. Well serves 1 # of Private, potable				Hicap Well ? No Hicap Property ? No				Reason for replaced or reconstructed well ? NOT CODE TO CLOSE TO SEPT				Construction Type Driven Point							
Heat Exchange ___ # of drillholes				Hicap Potable ?															
4. Potential Contamination Sources - ON REVERSE SIDE																			
5. Drillhole Dimensions and Construction Method														8. Geology					
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														Geology Codes - - Y -		Type, Caving/Noncaving, Color, Hardness, etc... SAND & GRAVEL		From (ft.) To (ft.) Surface 30	
6. Casing, Liner, Screen														9. Static Water Level		11. Well Is			
Removed? ___ depth ft. (If NO explain on back side)														8 ft. below ground surface		18 in. above grade			
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.) To (ft.)		10. Pump Test		Developed ? Yes									
2.5		WHITE WATER PITLAS				Surface 5		Pumping level ___ ft. below surface		Disinfected ? Yes									
2		R&D GALV ASTM A589-F				5 26		Pumping at 8 GP M for 1 Hrs.		Capped ? Yes									
Dia. (in.)		Screen type, material & slot size				From (ft.) To (ft.)		Pumping Method ?											
2		MIDWEST GALV 60#				26 30													
7. Grout or Other Sealing Material														12. Notified Owner of need to fill & seal ?					
Method																			
Kind of Sealing Material				From (ft.) To (ft.) # Sacks Cement		Filled & Sealed Well(s) as needed?				Yes									
				Surface															
														13. Constructor / Supervisory Driller		Lic #		Date Signed	
														LK				12-13-2001	
														Drill Rig Operator		Lic or Reg #		Date Signed	
														LN				12-11-2001	

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		64	Shoreline/Pool		40
Building Drain - Sanitary		20	Nonconforming Pit or Alcove		54
Building Overhang		6	Sewer - Building Sanitary		30
			Septic or Holding, or POWTS Tank		45

Comment:

Created On: 01-28-2002

Updated On: 06-30-2020

Review Status: