

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				MP195		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A							
Property Owner ZAUFT, GARY						Phone # (715)948-2600		1. Well Location				Fire # (if avail.)					
Mailing Address 975 29TH ST						Town of CLAYTON						Street Address or Road Name and Number 975 29TH					
City CLAYTON				State WI		Zip Code 54004											
County Polk		Co. Permit #		Notification #		Completed 11-25-1998		Subdivision Name				Lot # Block #					
Well Constructor (Business Name) MCCULLOUGH @ SONS INC				Lic. # 44		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD)							
Address 20335 FOREST BLVD N FOREST LAKE MN 55025-9764				Well Plan Approval #		Approval Date (mm-dd-yyyy)		°N		°W		Method Code					
								NW		NW		Section 22		Township 33 N		Range 15 W	
Hicap Permanent Well #				Common Well #		Specific Capacity 0.5				2. Well Type Reconstruction of previous unique well # constructed in Reason for replaced or reconstructed well ? Construction Type Drilled							
3. Well serves 1 # of HOME 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												8. Geology					
Dia. (in.) From (ft.) To (ft.)			Upper Enlarged Drillhole Lower Open Bedrock						Geology Codes		Type, Caving/Noncaving, Color, Hardness, etc...		From (ft.) To (ft.)				
10 Surface 55			Yes 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)						I		TOP SOIL		Surface 2				
6 55 86									Y		SAND GRAVEL		2 45				
									Z		CLAY GRAVEL		45 50				
									C		CLAY		50 53				
									S N		SOFT SANDROCK		53 55				
			H L		HARD LIME ROCK		55 86										
6. Casing, Liner, Screen												9. Static Water Level				11. Well Is	
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.) To (ft.)		30 ft. below ground surface				12 in. above grade					
6		ASTMA 53B SAWHILL 280 WELDED 18 97#				Surface 55		10. Pump Test Pumping level 50 ft. below surface Pumping at 10 GP M for 1 Hrs. Pumping Method ?				Developed ? Yes					
Dia. (in.)		Screen type, material & slot size				From (ft.) To (ft.)						Disinfected ? Yes					
7. Grout or Other Sealing Material		Method TREMIE PRESSURE Kind of Sealing Material From (ft.) To (ft.) # Sacks Cement BENTONITE GROUT Surface 20 2.5 S DRILL MUD 20 55				Capped ? Yes											
12. Notified Owner of need to fill & seal ?						Filled & Sealed Well(s) as needed? Yes											
13. Constructor / Supervisory Driller										Lic #		Date Signed					
DM												11-25-1998					
Drill Rig Operator		Lic or Reg #		Date Signed		DB				11-25-1998							

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Overhang		90	Septic or Holding, or POWTS Tank		80

Comment:

Created On: 01-19-1999

Updated On: 01-19-1999

Review Status: