Well Construction Report
WISCONSIN UNIQUE WELL NUMBER MS049

Drinking Water and Groundwater - DG/5
Department of Natural Resources, Box 7921
Madison WI 53707
Form 3300-077A

Property Owner	SELLHAUSEN, CHARLES
Phone #	(414)367-6802
Mailing Address	5033 RD O
City	NASHOTAH
State	WI
Zip Code	53058
County	Oconto
Co. Permit #	
Notification #	
Completed	12-23-1998
Well Constructor (Business Name)	TIPLER WELL DRILLING INC
Lic. #	55
Facility ID # (Public Wells)	
Well Plan Approval #	
Address	PO BOX 34 LAKEWOOD WI 54138-0034
Approval Date (mm-dd-yyyy)	
Hicap Permanent Well #	
Common Well #	
Specific Capacity	0.2

1. Well Location

Town of LAKEWOOD	Fire # (if avail.)
Street Address or Road Name and Number	5033 RD O
Subdivision Name	
Lot #	
Block #	
Latitude / Longitude in Decimal Degree (DD)	°N °W
Method Code	
SW SW or Govt Lot #	
Section	27
Township	33 N
Range	16 E

2. Well Type Reconstruction

of previous unique well # DE397 constructed in 91

Reason for replaced or reconstructed well ?

RAN LOW ON WATER

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.)
6	Surface	81

Upper Enlarged Drillhole

Lower Open Bedrock

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)

8. Geology

Geology Codes				Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
		Y		SAND GRAVEL	Surface	81

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	ASTM A-53 GR B SAWHILL TUBULAR WELDED JOINT	Surface	78

Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)

9. Static Water Level

40 ft. below ground surface

10. Pump Test

Pumping level 70 ft. below surface

Pumping at 7 GP M for 4 Hrs.

Pumping Method ?

11. Well Is

12 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
DONE PREVIOUS 8 27 91	Surface		

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed?

13. Constructor / Supervisory Driller	Lic #	Date Signed
AT		01-27-1999
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
MB		01-27-1999

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)		55	Building Overhang		25
			Septic or Holding, or POWTS Tank		40

Comment:

Created On: 04-01-1999 Updated On: 04-08-1999 Review Status: