

|                                                                                            |  |                                                                      |                                                                                                                                                                                                                                                                                       |                                                           |  |                                                                                                                             |  |                         |  |                                                                                                                                                          |  |                                        |  |                                                        |  |             |  |                    |  |
|--------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------|--|-------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------|--|--------------------------------------------------------|--|-------------|--|--------------------|--|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b>                     |  |                                                                      |                                                                                                                                                                                                                                                                                       | <b>MS462</b>                                              |  | <b>Drinking Water and Groundwater - DG/5</b><br><b>Department of Natural Resources, Box 7921</b><br><b>Madison WI 53707</b> |  |                         |  | Form 3300-077A                                                                                                                                           |  |                                        |  |                                                        |  |             |  |                    |  |
| Property Owner PHELPS, LEROY @ LINDA                                                       |  |                                                                      |                                                                                                                                                                                                                                                                                       |                                                           |  | Phone # (608)362-7243                                                                                                       |  | <b>1. Well Location</b> |  |                                                                                                                                                          |  | Fire # (if avail.)                     |  |                                                        |  |             |  |                    |  |
| Mailing Address 916 LIBERTY AVE                                                            |  |                                                                      |                                                                                                                                                                                                                                                                                       |                                                           |  | Town of BELOIT                                                                                                              |  |                         |  |                                                                                                                                                          |  | Street Address or Road Name and Number |  |                                                        |  |             |  |                    |  |
| City BELOIT                                                                                |  |                                                                      |                                                                                                                                                                                                                                                                                       |                                                           |  | State WI                                                                                                                    |  | Zip Code 53511          |  |                                                                                                                                                          |  | 2181 SHERLAND AVE                      |  |                                                        |  |             |  |                    |  |
| County Rock                                                                                |  | Co. Permit #                                                         |                                                                                                                                                                                                                                                                                       | Notification #                                            |  | Completed 09-28-1998                                                                                                        |  | Subdivision Name        |  |                                                                                                                                                          |  | Lot #                                  |  | Block #                                                |  |             |  |                    |  |
| Well Constructor (Business Name)<br>GOVERT BROS WELL DRILLING CO                           |  |                                                                      |                                                                                                                                                                                                                                                                                       | Lic. # 658                                                |  | Facility ID # (Public Wells)                                                                                                |  |                         |  | Latitude / Longitude in Decimal Degree (DD)<br>42.4965 °N -89.069 °W                                                                                     |  |                                        |  | Method Code<br>GCD013                                  |  |             |  |                    |  |
| Address 5234 N CO RD F<br>JANESVILLE WI 53545                                              |  |                                                                      |                                                                                                                                                                                                                                                                                       | Well Plan Approval #                                      |  | SW SW Section Township Range<br>or Govt Lot # 34 1 N 12 E                                                                   |  |                         |  | <b>2. Well Type</b> New Well<br>of previous unique well # constructed in<br>Reason for replaced or reconstructed well ?<br><br>Construction Type Drilled |  |                                        |  |                                                        |  |             |  |                    |  |
|                                                                                            |  |                                                                      |                                                                                                                                                                                                                                                                                       |                                                           |  | Approval Date (mm-dd-yyyy)                                                                                                  |  |                         |  |                                                                                                                                                          |  |                                        |  |                                                        |  |             |  |                    |  |
| Hicap Permanent Well #                                                                     |  | Common Well #                                                        |                                                                                                                                                                                                                                                                                       | Specific Capacity<br>1.7                                  |  |                                                                                                                             |  |                         |  |                                                                                                                                                          |  |                                        |  |                                                        |  |             |  |                    |  |
| <b>3. Well serves</b> 1 # of HOME<br>Private, potable<br>Heat Exchange ___ # of drillholes |  |                                                                      |                                                                                                                                                                                                                                                                                       | Hicap Well ? No<br>Hicap Property ? No<br>Hicap Potable ? |  |                                                                                                                             |  |                         |  |                                                                                                                                                          |  |                                        |  |                                                        |  |             |  |                    |  |
| <b>4. Potential Contamination Sources - ON REVERSE SIDE</b>                                |  |                                                                      |                                                                                                                                                                                                                                                                                       |                                                           |  |                                                                                                                             |  |                         |  |                                                                                                                                                          |  |                                        |  |                                                        |  |             |  |                    |  |
| <b>5. Drillhole Dimensions and Construction Method</b>                                     |  |                                                                      |                                                                                                                                                                                                                                                                                       |                                                           |  |                                                                                                                             |  |                         |  |                                                                                                                                                          |  |                                        |  | <b>8. Geology</b>                                      |  |             |  |                    |  |
| Dia. (in.) From (ft.) To (ft.)                                                             |  |                                                                      | Upper Enlarged Drillhole Lower Open Bedrock                                                                                                                                                                                                                                           |                                                           |  |                                                                                                                             |  |                         |  |                                                                                                                                                          |  |                                        |  |                                                        |  |             |  |                    |  |
| 8.75 Surface 42                                                                            |  |                                                                      | Yes Rotary - Mud Circulation .....<br>Rotary - Air .....<br>Rotary - Air & Foam .....<br>Drill-Through Casing Hammer<br>Reverse Rotary<br>Cable-tool Bit ___ in. dia...<br>Dual Rotary .....<br>Temp. Outer Casing ___ in. dia<br>Removed? ___ depth ft. (If NO explain on back side) |                                                           |  |                                                                                                                             |  |                         |  |                                                                                                                                                          |  |                                        |  |                                                        |  |             |  |                    |  |
| 6 42 105                                                                                   |  |                                                                      |                                                                                                                                                                                                                                                                                       |                                                           |  |                                                                                                                             |  |                         |  |                                                                                                                                                          |  |                                        |  |                                                        |  |             |  |                    |  |
| <b>6. Casing, Liner, Screen</b>                                                            |  |                                                                      |                                                                                                                                                                                                                                                                                       |                                                           |  |                                                                                                                             |  |                         |  |                                                                                                                                                          |  |                                        |  | <b>9. Static Water Level</b>                           |  |             |  | <b>11. Well Is</b> |  |
| Dia. (in.)                                                                                 |  | Material, Weight, Specification<br>Manufacturer & Method of Assembly |                                                                                                                                                                                                                                                                                       |                                                           |  | From (ft.)                                                                                                                  |  | To (ft.)                |  | 50 ft. below ground surface                                                                                                                              |  |                                        |  | 18 in. above grade                                     |  |             |  |                    |  |
| 6                                                                                          |  | A53 SCH 40 PE STEEL NEW #18 97 SAWHILL                               |                                                                                                                                                                                                                                                                                       |                                                           |  | Surface                                                                                                                     |  | 42                      |  | <b>10. Pump Test</b>                                                                                                                                     |  |                                        |  | Developed ? Yes                                        |  |             |  |                    |  |
| Dia. (in.)                                                                                 |  | Screen type, material & slot size                                    |                                                                                                                                                                                                                                                                                       |                                                           |  | From (ft.)                                                                                                                  |  | To (ft.)                |  | Pumping level 65 ft. below surface<br>Pumping at 25 GP M for 1.5 Hrs.<br>Pumping Method ?                                                                |  |                                        |  | Disinfected ? Yes<br>Capped ? Yes                      |  |             |  |                    |  |
|                                                                                            |  |                                                                      |                                                                                                                                                                                                                                                                                       |                                                           |  |                                                                                                                             |  |                         |  |                                                                                                                                                          |  |                                        |  |                                                        |  |             |  |                    |  |
| <b>7. Grout or Other Sealing Material</b>                                                  |  |                                                                      |                                                                                                                                                                                                                                                                                       |                                                           |  |                                                                                                                             |  |                         |  |                                                                                                                                                          |  |                                        |  | <b>12. Notified Owner of need to fill &amp; seal ?</b> |  |             |  |                    |  |
| Method PUMP @ TREMMY                                                                       |  |                                                                      |                                                                                                                                                                                                                                                                                       |                                                           |  |                                                                                                                             |  |                         |  |                                                                                                                                                          |  |                                        |  | Filled & Sealed Well(s) as needed?                     |  |             |  |                    |  |
| Kind of Sealing Material                                                                   |  |                                                                      |                                                                                                                                                                                                                                                                                       | From (ft.)                                                |  | To (ft.)                                                                                                                    |  | # Sacks Cement          |  |                                                                                                                                                          |  |                                        |  |                                                        |  |             |  |                    |  |
| PORTLAND CEMENT                                                                            |  |                                                                      |                                                                                                                                                                                                                                                                                       | Surface                                                   |  | 42                                                                                                                          |  | 8 S                     |  |                                                                                                                                                          |  |                                        |  |                                                        |  |             |  |                    |  |
| <b>13. Constructor / Supervisory Driller</b>                                               |  |                                                                      |                                                                                                                                                                                                                                                                                       |                                                           |  |                                                                                                                             |  |                         |  |                                                                                                                                                          |  |                                        |  | Lic #                                                  |  | Date Signed |  |                    |  |
| MG                                                                                         |  |                                                                      |                                                                                                                                                                                                                                                                                       |                                                           |  |                                                                                                                             |  |                         |  |                                                                                                                                                          |  |                                        |  |                                                        |  | 09-29-1998  |  |                    |  |
| Drill Rig Operator                                                                         |  |                                                                      |                                                                                                                                                                                                                                                                                       |                                                           |  |                                                                                                                             |  |                         |  |                                                                                                                                                          |  |                                        |  | Lic or Reg #                                           |  | Date Signed |  |                    |  |
| FP                                                                                         |  |                                                                      |                                                                                                                                                                                                                                                                                       |                                                           |  |                                                                                                                             |  |                         |  |                                                                                                                                                          |  |                                        |  |                                                        |  |             |  |                    |  |

**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) |           | 92       | Building Overhang                |           | 16       |
|                                                           |           |          | Septic or Holding, or POWTS Tank |           | 41       |

Comment:

Created On: 10-28-1998

Updated On: 12-09-2019

Review Status: