Well Construction Report
WISCONSIN UNIQUE WELL NUMBER MY313

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

Property Owner: REINCE, MARK	Phone #: (920)499-4680
Mailing Address: 1691 WESTERN AVE	
City: GREEN BAY	State: WI — Zip Code: 54303
County: Oconto	Co. Permit #:	Notification #:	Completed: 11-02-1998
Well Constructor (Business Name): VAN DE YACHT LEO WELL DRILLING I	Lic. #: 6097	Facility ID # (Public Wells):
Address: 3383 OAK FOREST DR GREEN BAY WI 54313	Well Plan Approval #:	Approval Date (mm-dd-yyyy):
Hicap Permanent Well #:	Common Well #:	Specific Capacity: 0.5

1. Well Location

Town of OCONTO				Fire # (if avail.):
Street Address or Road Name and Number: 6079 HWY J				
Subdivision Name:	Lot #:	Block #:		
Latitude / Longitude in Decimal Degree (DD): °N °W				Method Code:
NE NE or Govt Lot #:	Section: 20	Township: 28 N	Range: 21 E	

2. Well Type New Well
of previous unique well #: constructed in
Reason for replaced or reconstructed well ?: HOME
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.)
9	Surface	41
6	41	122

Upper Enlarged Drillhole / Lower Open Bedrock

- Yes — Rotary - Mud Circulation .....
- Yes — 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.)
C	CLAY	Surface	20
G	GRAVEL	20	30
L	LIMESTONE	30	122

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	NEW BLACK STEEL PLAIN END WELDED ASTM A53B 18 97#PER FT SAWHILL PIPE	Surface	41
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)

9. Static Water Level
10 ft. below ground surface

10. Pump Test
Pumping level 60 ft. below surface
Pumping at 25 GP M for 2 Hrs.
Pumping Method ?

11. Well Is
12 in. above grade
Developed ? Yes
Disinfected ? Yes
Capped ? Yes

7. Grout or Other Sealing Material
Method TREMIE PIPE PUMPED

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
NEAT CEMENT GROUT	Surface	41	8 S

12. Notified Owner of need to fill & seal ?
Filled & Sealed Well(s) as needed? No
N APP

13. Constructor / Supervisory Driller	Lic #	Date Signed
LV		11-02-1998
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
TV		11-02-1998

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

Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		120
Building Overhang		12
Clearwater Sump		35
Foundation Drain to Clearwater		14
Septic or Holding, or POWTS Tank		80

Comment:

Created On: 01-15-1999 Updated On: 01-15-1999 Review Status: