Well Construction Report
WISCONSIN UNIQUE WELL NUMBER NB956

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

Form 3300-077A

Property Owner: HANSON, DAVE		Phone #
Mailing Address: N11803 BALD EAGLE RD		
City: TREGO	State: WI	Zip Code: 54888

County	Co. Permit #	Notification #	Completed
Washburn			10-12-2003

Well Constructor (Business Name)	Lic. #	Facility ID # (Public Wells)
JOHN C SMITH	5901	

Address: JOHNS PUMP & WELL SERVICE
MINONG WI 54859

Well Plan Approval #

Approval Date (mm-dd-yyyy)

Hicap Permanent Well #	Common Well #	Specific Capacity

3. Well serves 1 # of NONE
Private,potable
Heat Exchange____# of drillholes

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

1. Well Location

Town of CHICOG

Fire # (if avail.) N1180

Street Address or Road Name and Number: N11803 BALD EAGLE RD

Subdivision Name	Lot #	Block #

Latitude / Longitude in Decimal Degree (DD) °N °W

Method Code

NE SE or Govt Lot #	Section	Township	Range
	2	41 N	13 W

2. Well Type New Well
of previous unique well # constructed in

Reason for replaced or reconstructed well ?
OLD WELL NON-COMPLYING

Construction Type: Driven Point

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Upper Enlarged Drillhole / Lower Open Bedrock

- 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)

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
1.225	A53 SAWHILL	Surface	31
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
1.225	SS DRIVE POINT 60	31	34

7. Grout or Other Sealing Material

Method

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
	Surface		

8. Geology

Geology Codes				Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
-	-	S	-	SAND	Surface	34

9. Static Water Level
12 ft. below ground surface

10. Pump Test
Pumping level _____ ft. below surface
Pumping at _____ GP for _____ Hrs.
Pumping Method ?

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

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? No
HOMEOWNER ADVISED

13. Constructor / Supervisory Driller	Lic #	Date Signed
JS		10-12-2003
Drill Rig Operator	**Lic or Reg #**	**Date Signed**

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	Shoreline/Pool		200
Building Overhang		3	Septic or Holding, or POWTS Tank		40

Comment:

Created On: 11-03-2003 Updated On: 11-03-2003 Review Status: