Well Construction Report
WISCONSIN UNIQUE WELL NUMBER NM923

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

Property Owner: KRETZ, PETE	Phone #: (715)732-9198
Mailing Address: N2235 SHORE DR	
City: MARINETTE	State: WI — Zip Code: 54143
County: Marinette	Co. Permit #: — Notification #: — Completed: 10-14-2004
Well Constructor (Business Name): WILLIAM G WALKER	Lic. #: 4750 — Facility ID # (Public Wells):
Address: 721 MAIN ST, MARINETTE WI 54143-2631	Well Plan Approval #: — Approval Date (mm-dd-yyyy):
Hicap Permanent Well #:	Common Well #: — Specific Capacity:

1. Well Location

Town of PESHTIGO	Fire # (if avail.): N2335
Street Address or Road Name and Number: N2335 SHORE DR	
Subdivision Name:	Lot #: — Block #:
Latitude / Longitude in Decimal Degree (DD): °N °W	Method Code:

SW	NW	Section	Township	Range
or Govt Lot #	234	30	30 N	24 E

2. Well Type New Well
of previous unique well #: — constructed in:
Reason for replaced or reconstructed well ?:
Construction Type: Driven Point

3. Well serves # of SHED
Private,potable
Heat Exchange____# of drillholes
Hicap Well ? No
Hicap Property ?
Hicap Potable ?

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)

8. Geology

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
1.25	SS POINT	Surface	27
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
1.25	SS 80 MESH POINT	25	27

7. Grout or Other Sealing Material

Method

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

9. Static Water Level
14 ft. below ground surface

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

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

12. Notified Owner of need to fill & seal ?
Filled & Sealed Well(s) as needed? Yes

13. Constructor / Supervisory Driller	Lic #	Date Signed
WGW		10-14-2004
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)		100	Building Overhang		20

Comment:

Created On: 12-28-2004 Updated On: 01-25-2005 Review Status: