Well Construction Report
WISCONSIN UNIQUE WELL NUMBER NO957

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

Form 3300-077A

Property Owner: DEMILLE, DAVE	Phone #: (920)434-7337
Mailing Address: 2110 WEEDY ST	
City: GREEN BAY	State: WI — Zip Code: 54313
County: Oconto	Co. Permit #: — Notification #: — Completed: 11-12-1999
Well Constructor (Business Name): ALLEN D TAMM	Lic. #: 53 — Facility ID # (Public Wells):
Address: PO BOX 34 LAKEWOOD WI 54138	Well Plan Approval #: — Approval Date (mm-dd-yyyy):
Hicap Permanent Well #:	Common Well #: — Specific Capacity: 0.6

1. Well Location

Town of RIVERVIEW

Fire # (if avail.):

Street Address or Road Name and Number: MAIDEN LAKE RD

Subdivision Name: — Lot #: — Block #:

Latitude / Longitude in Decimal Degree (DD): °N °W — Method Code:

SE	SE	Section	Township	Range
or Govt Lot #		7	32 N	16 E

2. Well Type New Well

of previous unique well #: — constructed in:

Reason for replaced or reconstructed well ?

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.)
10	Surface	60
6	60	84

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.)
		S		SAND	Surface	13
		G	G	GRAVEL BOULDERS	13	65
		Y		SAND GRAVEL	65	84

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 WT. 18.97 PER FT	Surface	84
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 66 ft. below surface

Pumping at 15 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
DRILLING MUD	Surface	84	

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? Yes

13. Constructor / Supervisory Driller	Lic #	Date Signed
AT		02-16-2000
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
MB		02-16-2000

4a. Potential Contamination Sources Is the well located in floodplain ?

Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		50

Type	Qualifier	Distance
Building Overhang		12
Septic or Holding, or POWTS Tank		25

Comment:

Created On: 03-28-2000 Updated On: 03-28-2000 Review Status: