

|                                                                                       |  |                                                                      |  |                                                           |  |                                                                                                                                                                                                                                                                                       |  |                                                                                                                                               |  |                                                                                                                                   |  |                                                       |  |
|---------------------------------------------------------------------------------------|--|----------------------------------------------------------------------|--|-----------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------|--|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b>                |  |                                                                      |  | <b>OV275</b>                                              |  | <b>Drinking Water and Groundwater - DG/5</b><br><b>Department of Natural Resources, Box 7921</b><br><b>Madison WI 53707</b>                                                                                                                                                           |  |                                                                                                                                               |  | <small>Form 3300-077A</small>                                                                                                     |  |                                                       |  |
| Property Owner ZASTOUPIL, LEONARD                                                     |  |                                                                      |  |                                                           |  | Phone #                                                                                                                                                                                                                                                                               |  | <b>1. Well Location</b>                                                                                                                       |  |                                                                                                                                   |  | Fire # (if avail.)                                    |  |
| Mailing Address 9930 N STATE RD 27                                                    |  |                                                                      |  |                                                           |  |                                                                                                                                                                                                                                                                                       |  | Town of HAYWARD                                                                                                                               |  |                                                                                                                                   |  | 9930                                                  |  |
| City HAYWARD                                                                          |  |                                                                      |  |                                                           |  | State WI                                                                                                                                                                                                                                                                              |  | Zip Code 54843                                                                                                                                |  |                                                                                                                                   |  | Street Address or Road Name and Number<br>STATE RD 27 |  |
| County Sawyer                                                                         |  | Co. Permit #                                                         |  | Notification #                                            |  | Completed<br>12-14-2001                                                                                                                                                                                                                                                               |  | Subdivision Name                                                                                                                              |  |                                                                                                                                   |  | Lot #<br>Block #                                      |  |
| Well Constructor (Business Name)<br>FROEMEL WELL & PUMP REPAIR INC                    |  |                                                                      |  | Lic. #<br>6080                                            |  | Facility ID # (Public Wells)                                                                                                                                                                                                                                                          |  | Latitude / Longitude in Decimal Degree (DD)<br>°N °W                                                                                          |  |                                                                                                                                   |  | Method Code                                           |  |
| Address 15251 W COUNTY B<br>HAYWARD WI 54843-4100                                     |  |                                                                      |  | Well Plan Approval #                                      |  | SW NE Section Township Range<br>or Govt Lot # 33 41 N 9 W                                                                                                                                                                                                                             |  | <b>2. Well Type</b> Replacement<br>of previous unique well # constructed in<br>Reason for replaced or reconstructed well ?<br>OLD WELL FAILED |  |                                                                                                                                   |  |                                                       |  |
|                                                                                       |  |                                                                      |  | Approval Date (mm-dd-yyyy)                                |  |                                                                                                                                                                                                                                                                                       |  |                                                                                                                                               |  |                                                                                                                                   |  |                                                       |  |
| Hicap Permanent Well #                                                                |  | Common Well #                                                        |  | Specific Capacity<br>2                                    |  |                                                                                                                                                                                                                                                                                       |  |                                                                                                                                               |  |                                                                                                                                   |  |                                                       |  |
| <b>3. Well serves</b> 1 # of<br>Private, potable<br>Heat Exchange ___ # of drillholes |  |                                                                      |  | Hicap Well ? No<br>Hicap Property ? No<br>Hicap Potable ? |  |                                                                                                                                                                                                                                                                                       |  | Construction Type Drilled                                                                                                                     |  |                                                                                                                                   |  |                                                       |  |
| <b>4. Potential Contamination Sources - ON REVERSE SIDE</b>                           |  |                                                                      |  |                                                           |  |                                                                                                                                                                                                                                                                                       |  |                                                                                                                                               |  |                                                                                                                                   |  |                                                       |  |
| <b>5. Drillhole Dimensions and Construction Method</b>                                |  |                                                                      |  |                                                           |  |                                                                                                                                                                                                                                                                                       |  |                                                                                                                                               |  |                                                                                                                                   |  |                                                       |  |
| Dia. (in.)                                                                            |  | From (ft.)                                                           |  | To (ft.)                                                  |  | Upper Enlarged Drillhole                                                                                                                                                                                                                                                              |  | Lower Open Bedrock                                                                                                                            |  | <b>8. Geology</b>                                                                                                                 |  |                                                       |  |
| 4                                                                                     |  | Surface                                                              |  | 31                                                        |  | Rotary - Mud Circulation .....<br>Rotary - Air .....<br>Rotary - Air & Foam .....<br>Drill-Through Casing Hammer<br>Reverse Rotary<br>Yes Cable-tool Bit 4in. dia... No<br>Dual Rotary .....<br>Temp. Outer Casing ___ in. dia<br>Removed? ___ depth ft. (If NO explain on back side) |  |                                                                                                                                               |  | Geology Codes<br>- - Y -<br>Type, Caving/Noncaving, Color, Hardness, etc...<br>SAND & GRAVEL<br>From (ft.) To (ft.)<br>Surface 31 |  |                                                       |  |
| <b>6. Casing, Liner, Screen</b>                                                       |  |                                                                      |  |                                                           |  |                                                                                                                                                                                                                                                                                       |  |                                                                                                                                               |  |                                                                                                                                   |  |                                                       |  |
| Dia. (in.)                                                                            |  | Material, Weight, Specification<br>Manufacturer & Method of Assembly |  |                                                           |  | From (ft.)                                                                                                                                                                                                                                                                            |  | To (ft.)                                                                                                                                      |  | <b>9. Static Water Level</b>                                                                                                      |  |                                                       |  |
| 4                                                                                     |  | NEW BLACK STEEL WELDED 10.79#/FT ASTM A53-B IPSCO                    |  |                                                           |  | Surface                                                                                                                                                                                                                                                                               |  | 28                                                                                                                                            |  | 18 ft. below ground surface                                                                                                       |  |                                                       |  |
| Dia. (in.)                                                                            |  | Screen type, material & slot size                                    |  |                                                           |  | From (ft.)                                                                                                                                                                                                                                                                            |  | To (ft.)                                                                                                                                      |  | <b>11. Well Is</b>                                                                                                                |  |                                                       |  |
| 4                                                                                     |  | SS 20 SLOT                                                           |  |                                                           |  | 28                                                                                                                                                                                                                                                                                    |  | 31                                                                                                                                            |  | 22 in. above grade<br>Developed ? Yes<br>Disinfected ? Yes<br>Capped ? Yes                                                        |  |                                                       |  |
| <b>7. Grout or Other Sealing Material</b>                                             |  |                                                                      |  |                                                           |  |                                                                                                                                                                                                                                                                                       |  |                                                                                                                                               |  |                                                                                                                                   |  |                                                       |  |
| Method                                                                                |  |                                                                      |  |                                                           |  |                                                                                                                                                                                                                                                                                       |  |                                                                                                                                               |  |                                                                                                                                   |  |                                                       |  |
| Kind of Sealing Material                                                              |  |                                                                      |  | From (ft.)                                                |  | To (ft.)                                                                                                                                                                                                                                                                              |  | # Sacks Cement                                                                                                                                |  | <b>12. Notified Owner of need to fill &amp; seal ?</b>                                                                            |  |                                                       |  |
|                                                                                       |  |                                                                      |  | Surface                                                   |  |                                                                                                                                                                                                                                                                                       |  |                                                                                                                                               |  | Filled & Sealed Well(s) as needed? Yes                                                                                            |  |                                                       |  |
| <b>13. Constructor / Supervisory Driller</b>                                          |  |                                                                      |  |                                                           |  |                                                                                                                                                                                                                                                                                       |  |                                                                                                                                               |  |                                                                                                                                   |  |                                                       |  |
| GO                                                                                    |  |                                                                      |  | Lic #                                                     |  | Date Signed                                                                                                                                                                                                                                                                           |  | 12-14-2001                                                                                                                                    |  |                                                                                                                                   |  |                                                       |  |
| Drill Rig Operator                                                                    |  |                                                                      |  | Lic or Reg #                                              |  | Date Signed                                                                                                                                                                                                                                                                           |  | 12-14-2001                                                                                                                                    |  |                                                                                                                                   |  |                                                       |  |
| DF                                                                                    |  |                                                                      |  |                                                           |  |                                                                                                                                                                                                                                                                                       |  |                                                                                                                                               |  |                                                                                                                                   |  |                                                       |  |

**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                |           | 180      |
|                                                           |           |          | Septic or Holding, or POWTS Tank |           | 180      |

Comment:

Created On: 01-31-2002

Updated On: 01-31-2002

Review Status: