Well Construction Report
WISCONSIN UNIQUE WELL NUMBER OV779

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

Form 3300-077A

Property Owner: BOWER, WAYNE			Phone #: (262)877-3700
Mailing Address: 1608 SUNSET			
City: TWIN LAKES	State: WI	Zip Code: 53181	
County: Kenosha	Co. Permit #:	Notification #:	Completed: 05-24-2001
Well Constructor (Business Name): DAVID FRANK GEHRING	Lic. #: 285	Facility ID # (Public Wells):	
Address: 5506 353RD AVE BURLINGTON WI 53105-8858		Well Plan Approval #:	
		Approval Date (mm-dd-yyyy):	
Hicap Permanent Well #:	Common Well #:	Specific Capacity: 10	

1. Well Location

Town of TWIN LAKES

Fire # (if avail.):

Street Address or Road Name and Number: 1608 SUNSET

Subdivision Name	Lot #	Block #
LAKE ELIZABETH MNR	8	6

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

Method Code:

NW	SW	Section	Township	Range
or Govt Lot #		32	1 N	19 E

2. Well Type New Well

of previous unique well #: constructed in

Reason for replaced or reconstructed well ?: DOMISTIC WATER

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.)
8	Surface	7
5	7	30

Upper Enlarged Drillhole / Lower Open Bedrock

- Rotary - Mud Circulation .....
- Rotary - Air .....
- Rotary - Air & Foam .....
- Drill-Through Casing Hammer
- Reverse Rotary
- Yes Cable-tool Bit 5in. dia... No
- 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	20
-	-	Y	-	SAND-GRAVEL	20	33

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
5	SAWHILL STEEL T&C ASTM A53B 15 PPF	Surface	30
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
5	STAINLESS STEEL #25	30	33

9. Static Water Level

5 ft. below ground surface

10. Pump Test

Pumping level 7 ft. below surface

Pumping at 20 GP M for 2 Hrs.

Pumping Method ?

11. Well Is

14 in. above grade

Developed ? Yes

Disinfected ? Yes

Capped ? Yes

7. Grout or Other Sealing Material

Method START HOLE

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

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? Yes

13. Constructor / Supervisory Driller	Lic #	Date Signed
DFG		05-24-2001
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
JLS		05-24-2001

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Overhang		18	Downspout/Yard Hydrant		14
Collector Sewer - San or Storm	>	60	Foundation Drain to Clearwater		15
			Sewer - Building Sanitary		40

Comment:

Created On: 07-13-2001 Updated On: 07-13-2001 Review Status: