

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				RF435		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A							
Property Owner MIKICH, KENNETH						Phone # (414)281-3062		1. Well Location				Fire # (if avail.)					
Mailing Address 3745 W LOOURIS RD						Town of ROME						953					
City GREENFIELD						State WI		Zip Code 53221				Street Address or Road Name and Number					
953 EAST CT						Subdivision Name				Lot #		Block #					
County Adams		Co. Permit #		Notification # 20197959		Completed 06-24-2005		Latitude / Longitude in Decimal Degree (DD)				Method Code					
Well Constructor (Business Name) TIMOTHY D DOLATA						Lic. # 5522		Facility ID # (Public Wells)				44.2244 °N -89.7659 °W		GCD013			
Address TIM DOLATA SEPTIC & WELL SERVICES LLC NEW LISBON WI 53950						Well Plan Approval #		SW NE		Section 10		Township 20 N		Range 6 E			
						Approval Date (mm-dd-yyyy)		or Govt Lot #		10		20 N		6 E			
Hicap Permanent Well #				Common Well #		Specific Capacity 0.5		2. Well Type Replacement									
3. Well serves 1 # of Private, potable Heat Exchange ___ # of drillholes						Hicap Well ? No		of previous unique well # constructed in									
						Hicap Property ? No		Reason for replaced or reconstructed well ?									
						Hicap Potable ?		Construction Type Driven Point									
4. Potential Contamination Sources - ON REVERSE SIDE												5. Drillhole Dimensions and Construction Method		8. Geology			
Dia. (in.)		From (ft.)		To (ft.)		Upper Enlarged Drillhole		Lower Open Bedrock		Geology Codes		Type, Caving/Noncaving, Color, Hardness, etc...		From (ft.)		To (ft.)	
2		Surface		42		Rotary - Mud Circulation				Y - S -		YELLOW SAND		Surface		10	
1.25		42		45		Rotary - Air				I N S -		WHITE FINE SAND		10		30	
						Rotary - Air & Foam				I M Y -		WHITE MED SAND/GRAVEL		30		45	
						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												9. Static Water Level		11. Well Is			
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		10 ft. below ground surface		12 in. above grade					
2		SAWHILL 2 INCH R&D .154 WALL ASTM A-589 T&C				Surface		42		10. Pump Test		Developed ? Yes					
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping level 30 ft. below surface		Disinfected ? Yes					
1.25		JOHNSON STAINLESS 7 SLOT				42		45		Pumping at 10 GP M for 1 Hrs.		Capped ? Yes					
										Pumping Method ?							
7. Grout or Other Sealing Material												12. Notified Owner of need to fill & seal ?					
Method BEN SEAL & DRILL CUTTINGS												Filled & Sealed Well(s) as needed? Yes					
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement									
				Surface													
13. Constructor / Supervisory Driller												Lic #		Date Signed			
TD														07-01-2005			
Drill Rig Operator												Lic or Reg #		Date Signed			
TD														07-01-2005			

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		75	Building Overhang		5
			Septic or Holding, or POWTS Tank		40

Comment:

Created On: 09-26-2005

Updated On: 05-04-2020

Review Status: