Well Construction Report
WISCONSIN UNIQUE WELL NUMBER RU336

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

Form 3300-077A

Property Owner: HYDE, ROBERT	Phone #: (715)479-8538
Mailing Address: 11474 YOUNGS LN	
City: THREE LAKES	State: WI — Zip Code: 54562
County: Forest	Co. Permit #: — Notification #: — Completed: 08-31-2004
Well Constructor (Business Name): ARTHUR P SIMAC	Lic. #: 4084 — Facility ID # (Public Wells):
Address: EAGLE RIVER WI 54521-0961	Well Plan Approval #: — Approval Date (mm-dd-yyyy):
Hicap Permanent Well #:	Common Well #: — Specific Capacity:

1. Well Location

Town of HILES	Fire # (if avail.): 11474
Street Address or Road Name and Number: 11474 YOUNGS LN	
Subdivision Name:	Lot #: — Block #:
Latitude / Longitude in Decimal Degree (DD): 45.9251 °N -89.0142 °W	Method Code: GCD013

SW	SE	Section	Township	Range
or Govt Lot # 1		20	40 N	12 E

2. Well Type Replacement

of previous unique well # — constructed in

Reason for replaced or reconstructed well ?

Construction Type: Driven Point

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

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

6. Casing, Liner, Screen — Removed? ____depth ft. (If NO explain on back side)

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
2	STEEL	Surface	37
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
2	STAINLESS STEEL 10 SLOT	33	37

7. Grout or Other Sealing Material

Method

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

8. Geology

Geology Codes				Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
-	-	S	-	SAND	Surface	37

9. Static Water Level

15 ft. below ground surface

10. Pump Test

Pumping level 15 ft. below surface

Pumping at 8 GP M for 10 Hrs.

Pumping Method ?

11. Well Is

12 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
BS		09-01-2004
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)		85	Shoreline/Pool		100
Building Overhang		5	Septic or Holding, or POWTS Tank		65

Comment:

Created On: 12-17-2004 Updated On: 06-16-2020 Review Status: