

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		1. Well Location				Fire # (if avail.)															
Mailing Address 11474 YOUNGS LN						Town of HILES						11474															
City THREE LAKES						State WI		Zip Code 54562				Street Address or Road Name and Number 11474 YOUNGS LN															
County Forest		Co. Permit #		Notification #		Completed 08-31-2004		Subdivision Name				Lot # Block #															
Well Constructor (Business Name) ARTHUR P SIMAC				Lic. # 4084		Facility ID # (Public Wells)		Latitude / Longitude in Decimal Degree (DD) 45.9251 °N -89.0142 °W				Method Code GCD013															
Address EAGLE RIVER WI 54521-0961				Well Plan Approval #		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																			
				Approval Date (mm-dd-yyyy)																							
Hicap Permanent Well #		Common Well #		Specific Capacity		Hicap Well ? No Hicap Property ? No Hicap Potable ?																					
3. Well serves 1 # of Private, potable Heat Exchange ___ # of drillholes																											
4. Potential Contamination Sources - ON REVERSE SIDE																											
5. Drillhole Dimensions and Construction Method																											
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Upper Enlarged Drillhole</td> <td style="width: 40%;">Lower Open Bedrock</td> </tr> <tr> <td colspan="2"> 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 </td> </tr> </table>												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													
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8. Geology																											
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6. Casing, Liner, Screen																											
Removed? ___ depth ft. (If NO explain on back side)																											
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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																											
7. Grout or Other Sealing Material																											
Method																											
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12. Notified Owner of need to fill & seal ?																											
Filled & Sealed Well(s) as needed? Yes																											
13. Constructor / Supervisory Driller																											
BS																											
Date Signed 09-01-2004																											
Drill Rig Operator																											
Lic or Reg # Date Signed																											

4a. Potential Contamination SourcesIs 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: