Well Construction Report
WISCONSIN UNIQUE WELL NUMBER SB496

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

Form 3300-077A

Property Owner: WEGNER, MIKE			Phone #
Mailing Address: 6687 DEMBY RD			
City: ARENA	State: WI	Zip Code: 53503	
County: Iowa	Co. Permit #	Notification #	Completed: 03-01-2005

Well Constructor (Business Name): SAM RODAMAKER	Lic. #: 349	Facility ID # (Public Wells)	
Address: WATERMAKER WELL DRLG&WATER SYS LLC SPRING GREEN WI 53588-8904		Well Plan Approval #	
		Approval Date (mm-dd-yyyy)	
Hicap Permanent Well #	Common Well #	Specific Capacity	

3. Well serves 1 # of
Private,potable
Heat Exchange____# of drillholes

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

1. Well Location
Town of ARENA

Fire # (if avail.): 6687

Street Address or Road Name and Number: 6687 DEMBY RD

Subdivision Name	Lot #	Block #

Latitude / Longitude in Decimal Degree (DD): 43.1504 °N -89.9892 °W
Method Code: GCD013

NE	SW	Section	Township	Range
or Govt Lot #		23	8 N	4 E

2. Well Type Replacement
of previous unique well # constructed in

Reason for replaced or reconstructed well ?
OLD POINT FAILING

Construction Type: Driven Point

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.)
1.25	GALVANIZED SAWHILL	Surface	25
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
1.25	JOHNSON STAINLESS 10 SLOT	25	29

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.)
-	-	Y	-	SAND & GRAVEL	Surface	29

9. Static Water Level
12 ft. below ground surface

10. Pump Test
Pumping level _____ ft. below surface
Pumping at _____ GP for _____ Hrs.
Pumping Method ?

11. Well Is
14 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
BR		03-17-2005
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)		90	Sewer - Building Sanitary		20
Building Overhang		5	Septic or Holding, or POWTS Tank		60

Comment:

Created On: 04-13-2005 Updated On: 01-27-2020 Review Status: