Well Construction Report
WISCONSIN UNIQUE WELL NUMBER SR487

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

Form 3300-077A

Property Owner: BOETTCHER, GLEN			Phone #: (715)479-3873
Mailing Address: 4430 OTTER LAKE RD			
City: EAGLE RIVER	State: WI	Zip Code: 54521	
County: Vilas	Co. Permit #:	Notification #:	Completed: 11-02-2004

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 LINCOLN			Fire # (if avail.): 4428
Street Address or Road Name and Number: 4428 OTTER LAKE RD			
Subdivision Name:	Lot #:	Block #:	
Latitude / Longitude in Decimal Degree (DD): 45.9391 °N -89.2269 °W			Method Code: GCD013

SW	NE	Section	Township	Range
or Govt Lot #		22	40 N	10 E

2. Well Type New Well
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

Removed? ____depth ft. (If NO explain on back side)

6. Casing, Liner, Screen

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
21 ft. below ground surface

10. Pump Test
Pumping level 21 ft. below surface
Pumping at 10 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		11-02-2004
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		200
Building Overhang		8	Septic or Holding, or POWTS Tank		65

Comment:

Created On: 12-17-2004 Updated On: 06-30-2020 Review Status: