# Well Construction Report
## *WISCONSIN UNIQUE WELL NUMBER* TH065

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

Form 3300-077A

| | | | |
|---|---|---|---|
| Property Owner: FORMANKIEWICZ, ROBERT | | | Phone #: (608)751-0426 |
| Mailing Address: 542 BAY DR | | | |
| City: BELOIT | State: WI | Zip Code: 53511 | |
| County: Rock | Co. Permit #: | Notification #: 6515282901 | Completed: 08-05-2016 |

| | | | |
|---|---|---|---|
| Well Constructor (Business Name): CHARLES WADE MARTIN | Lic. #: 6623 | Facility ID # (Public Wells): | |
| Address: 1192 PRAIRIE LN<br>MACHESNEY PARK IL 61115 | | Well Plan Approval #: | |
| | | Approval Date (mm-dd-yyyy): | |
| Hicap Permanent Well #: | Common Well #: | Specific Capacity: 2.9 | |

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

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

**1. Well Location**
Town of BELOIT

Fire # (if avail.):

Street Address or Road Name and Number: 542 BAY DR

| | | |
|---|---|---|
| Subdivision Name: HERON BAY | Lot #: 1 | Block #: |

Latitude / Longitude in Decimal Degree (DD): 42.5743 °N -89.0422 °W
Method Code: GCD013

| | | | |
|---|---|---|---|
| NE SW or Govt Lot #: | Section: 2 | Township: 1 N | Range: 12 E |

**2. Well Type** New Well
of previous unique well # constructed in

Reason for replaced or reconstructed well ?

Construction Type: Drilled

**4. Potential Contamination Sources - ON REVERSE SIDE**

**5. Drillhole Dimensions and Construction Method**

| Dia. (in.) | From (ft.) | To (ft.) |
|---|---|---|
| 5 | Surface | 87 |

Upper Enlarged Drillhole / Lower Open Bedrock

- Rotary - Mud Circulation .....
- Rotary - Air .....
- Rotary - Air & Foam .....
- Drill-Through Casing Hammer
- Reverse Rotary
- Yes Cable-tool Bit 5in. dia... No
- Dual Rotary .....
- Temp. Outer Casing ____in. dia
  Removed? ____depth ft. (If NO explain on back side)

**8. Geology**

| Geology Codes | | | | Type, Caving/Noncaving, Color, Hardness, etc... | From (ft.) | To (ft.) |
|---|---|---|---|---|---|---|
| T | - | S | - | BROWN SAND | Surface | 10 |
| T | - | Y | - | BROWN SAND & GRAVEL | 10 | 60 |
| G | - | S | G | GRAY SAND & BROWN GRAVEL | 60 | 87 |

**6. Casing, Liner, Screen**

| Dia. (in.) | Material, Weight, Specification Manufacturer & Method of Assembly | From (ft.) | To (ft.) |
|---|---|---|---|
| 5 | T&C ASTM A53 IPSCO | Surface | 84 |
| Dia. (in.) | Screen type, material & slot size | From (ft.) | To (ft.) |
| 4 | S.S. .15 SLOT | 84 | 87 |

**7. Grout or Other Sealing Material**
Method MOUNDED AROUND CASING

| Kind of Sealing Material | From (ft.) | To (ft.) | # Sacks Cement |
|---|---|---|---|
| BENSEAL | Surface | 80 | 3 S |

**9. Static Water Level**
45 ft. below ground surface

**10. Pump Test**
Pumping level 52 ft. below surface
Pumping at 20 GP M for 2 Hrs.
Pumping Method ?

**11. Well Is**
16 in. above grade
Developed ? Yes
Disinfected ? Yes
Capped ? Yes

**12.** Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? No
NONE

| **13.** Constructor / Supervisory Driller | Lic # | Date Signed |
|---|---|---|
| CWM | | 08-18-2016 |
| Drill Rig Operator | Lic or Reg # | Date Signed |
| CWM | | 08-18-2016 |

**4a. Potential Contamination Sources** Is the well located in floodplain ? No

| Type | Qualifier | Distance |
|---|---|---|
| Building Overhang | | 25 |

Comment:

Created On: 09-13-2016 Updated On: 12-09-2019 Review Status: