

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				UB992		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A											
Property Owner FLESVIG, RAGNER						Phone #		1. Well Location				Fire # (if avail.)									
Mailing Address 1383 BRANDYWINE RD						Town of WASHINGTON						799									
City CROWN POINT						State IN		Zip Code 46307				Street Address or Road Name and Number TOWNLINE RD									
County		Co. Permit #		Notification #		Completed		Subdivision Name				Lot #		Block #							
Door				40496350		06-01-2011															
Well Constructor (Business Name) JORNS, HARVEY				Lic. # 546		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD) 45.37618 °N -88.87292 °W				Method Code GPS008							
Address HARVEY & DAVID JORNS WD INC STURGEON BAY WI 54235--980				Well Plan Approval #				NE NE		Section 5		Township 33 N		Range 30 E							
				Approval Date (mm-dd-yyyy)				or Govt Lot #													
Hicap Permanent Well #				Common Well #		Specific Capacity				2. Well Type New Well				of previous unique well #		constructed in					
										Reason for replaced or reconstructed well ?											
3. Well serves 1 # of				Hicap Well ? No																	
Private, potable				Hicap Property ? No																	
Heat Exchange ___ # of drillholes				Hicap Potable ?						Construction Type Drilled											
4. Potential Contamination Sources - ON REVERSE SIDE																					
5. Drillhole Dimensions and Construction Method														8. Geology							
Dia. (in.)		From (ft.)		To (ft.)		Upper Enlarged Drillhole				Lower Open Bedrock		Geology Codes		Type, Caving/Noncaving, Color, Hardness, etc...		From (ft.)		To (ft.)			
10		Surface		7								- - P -		HARDPAN		Surface		5			
8		7		147		<u>Yes</u> Rotary - Air <u>Yes</u>						- - L -		LIMESTONE		5		261			
6		147		261		Rotary - Air & Foam Drill-Through Casing Hammer Reverse Rotary Cable-tool Bit ___ in. dia... Dual Rotary <u>Yes</u> Temp. Outer Casing 8in. dia <u>Yes</u> Removed? 8depth ft. (If NO explain on back side)															
6. Casing, Liner, Screen														9. Static Water Level				11. Well Is			
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		19 ft. above ground surface				12 in. above grade							
6		STANDARD WEIGHT BLACK STEEL CASING NEW PLAIN END ASTM A53 WHEATLAND TUBE				Surface		147		10. Pump Test				Developed ? Yes							
										Pumping level 155 ft. below surface				Disinfected ? Yes							
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping at ___ GP for 1 Hrs.				Capped ? Yes							
										Pumping Method ?											
7. Grout or Other Sealing Material														12. Notified Owner of need to fill & seal ?							
Method BRAIDENHEAD														Filled & Sealed Well(s) as needed?							
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement													
NEAT CEMENT				Surface		147		54 S													
														13. Constructor / Supervisory Driller				Lic #		Date Signed	
														HJ						06-02-2011	
														Drill Rig Operator				Lic or Reg #		Date Signed	

4a. Potential Contamination SourcesIs the well located in floodplain ? No

Type	Qualifier	Distance
Building Overhang		25

Comment:

Created On: 03-19-2015

Updated On: 04-08-2015

Review Status: