Well Construction Report
WISCONSIN UNIQUE WELL NUMBER UK993

Drinking Water and Groundwater - DG/5
Department of Natural Resources, Box 7921
Madison WI 53707
Form 3300-077A

Property Owner: BARKAI, IRINE		Phone #: (715)834-5727
Mailing Address: 2590 90TH ST		
City: EAU CLAIRE	State: WI	Zip Code: 54703

County	Co. Permit #	Notification #	Completed
Chippewa	29955	32818990	04-30-2009

Well Constructor (Business Name)	Lic. #	Facility ID # (Public Wells)
CHRISTOPHER J OLSON	5820	

Address: OLSON BROS WELL DRLG
EAU CLAIRE WI 54701

Well Plan Approval #

Approval Date (mm-dd-yyyy)

Hicap Permanent Well #	Common Well #	Specific Capacity
		1.7

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

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

1. Well Location
Town of LAKE HALLIE

Fire # (if avail.): 2590

Street Address or Road Name and Number: 2590 90TH ST

Subdivision Name	Lot #	Block #

Latitude / Longitude in Decimal Degree (DD)	Method Code
44.88078 °N -91.49248 °W	GPS008

SE NE or Govt Lot #	Section	Township	Range
	29	28 N	9 W

2. Well Type Replacement
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.)
6	Surface	60

Upper Enlarged Drillhole / Lower Open Bedrock

- Rotary - Mud Circulation .....
- Rotary - Air .....
- Rotary - Air & Foam .....
- Yes — 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)

8. Geology

Geology Codes				Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
-	-	Y	G	SAND, GRAVEL, ROCKS	Surface	60

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	A53B USA P.E. IPSCO CASING WELDED JOINTS	Surface	57
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
6	TEL 015 SLOT 36-IN	57	60

7. Grout or Other Sealing Material

Method MOUNDED

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
BENTONITE CASING SEAL	Surface	10	2 S

9. Static Water Level
40 ft. below ground surface

10. Pump Test
Pumping level 46 ft. below surface
Pumping at 10 GP for 1 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? Yes

13. Constructor / Supervisory Driller	Lic #	Date Signed
CJO		04-30-2009
Drill Rig Operator	**Lic or Reg #**	**Date Signed**

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

Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)	>	75
Building Overhang		25
Sewer - Building Sanitary		50
Fuel Oil Tank	>	50
Septic or Holding, or POWTS Tank	>	50

Comment:

Created On: 07-07-2009 Updated On: 06-11-2020 Review Status: