

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				UO106		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A											
Property Owner CAVALLARO, JOSEPH						Phone #															
Mailing Address 618 OREGON AVE						1. Well Location						Fire # (if avail.)									
City WEST DUNDEE						State IL		Zip Code 60118				Town of GERMANTOWN		N8488							
Street Address or Road Name and Number						N8488 16TH AVE															
County Juneau		Co. Permit #		Notification # 28073819		Completed 11-28-2007		Subdivision Name CSM 3028				Lot # 2		Block #							
Well Constructor (Business Name)				Lic. # 163		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD)				Method Code							
FOSTER ENTERPRISES LTD						Well Plan Approval #				°N °W											
Address 2520 STATE RD 13 ADAMS WI 53910-9739						Approval Date (mm-dd-yyyy)				NW NE Section Township Range		or Govt Lot # 12 17 N 4 E									
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						Construction Type Driven Point											
Private, potable				Hicap Property ? No																	
Heat Exchange ___ # of drillholes				Hicap Potable ?																	
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.)	
6		Surface		6		Rotary - Mud Circulation								- - S -		SAND		Surface		20	
2		6		35		Rotary - Air								- A Y -		COARSE SAND & GRAVEL		20		35	
						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												9. Static Water Level				11. Well Is					
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		6 ft. below ground surface				24 in. above grade							
2		SEAL ASTM A-53A THREADED COUPLED 3.75#				Surface		31		10. Pump Test				Developed ? Yes							
										Pumping level 6 ft. below surface				Disinfected ? Yes							
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping at 12 GP M for 1 Hrs.				Capped ? Yes							
1.25		CAMPBELL SS 10 SLOT				31		35		Pumping Method ?											
7. Grout or Other Sealing Material												12. Notified Owner of need to fill & seal ?									
Method																					
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement		Filled & Sealed Well(s) as needed? No											
PITLESS ADPT				Surface						NONE											
												13. Constructor / Supervisory Driller				Lic #		Date Signed			
												DSF						11-28-2007			
												Drill Rig Operator				Lic or Reg #		Date Signed			

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		90	Sewer - Building Sanitary		42
Building Overhang		9	Septic or Holding, or POWTS Tank		43

Comment:

Created On: 01-10-2008

Updated On: 02-28-2008

Review Status: