Well Construction Report
WISCONSIN UNIQUE WELL NUMBER UU380

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

Form 3300-077A

Property Owner: PARKIN, RUSSEL | Phone #:

Mailing Address: S13021 HIGHBANKS RD

City: SPRING GREEN | State: WI | Zip Code: 53588

County	Co. Permit #	Notification #	Completed
Sauk		32596592	03-22-2009

Well Constructor (Business Name): WATERMAKER WELL DRILLING | Lic. #: 6911 | Facility ID # (Public Wells):

Address: & WATER SYSTEMS LLC
SPRING GREEN WI 53588

Well Plan Approval #:

Approval Date (mm-dd-yyyy):

Hicap Permanent Well # | Common Well # | Specific Capacity

1. Well Location

Town of SPRING GREEN | Fire # (if avail.): S1302

Street Address or Road Name and Number: SAME

Subdivision Name | Lot # | Block #

Latitude / Longitude in Decimal Degree (DD): °N °W | Method Code

NW or Govt Lot #	NW	Section	Township	Range
		17	8 N	4 E

2. Well Type Replacement

of previous unique well # | constructed in

Reason for replaced or reconstructed well ?: FAILING

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

6. Casing, Liner, Screen — Removed? ____depth ft. (If NO explain on back side)

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
1.25	GALVANIZED SAWHILL	Surface	31
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
1.25	JOHNSON 10 SLOT STAINLESS	31	35

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	35

9. Static Water Level

14 ft. below ground surface

10. Pump Test

Pumping level _____ ft. below surface

Pumping at _____ GP for _____ Hrs.

Pumping Method ?

11. Well Is

14 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
BR		04-09-2009
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)	>	70
Building Drain - Sanitary	>	30
Foundation Drain to Sewer	>	30
Sewer - Building Sanitary	>	30
Septic or Holding, or POWTS Tank	>	40

Comment:

Created On: 05-20-2009 Updated On: 05-26-2009 Review Status: