# Well Construction Report
## *WISCONSIN UNIQUE WELL NUMBER* UX197

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

| | |
|---|---|
| Property Owner: TEMBY, TIM & LISA %PORTSIDE BUIL | Phone # |
| Mailing Address: 810 S LANSING AVE | |
| City: STURGEON BAY | State: WI — Zip Code: 54235 |

| County | Co. Permit # | Notification # | Completed |
|---|---|---|---|
| Door | | 57353157 | 12-11-2015 |

| Well Constructor (Business Name) | Lic. # | Facility ID # (Public Wells) |
|---|---|---|
| CHARLIES PUMPS & WELL DRILLING INC | 143 | |

Address: 1122 ROOSEVELT CT, BRUSSELS WI 54204-9553

Well Plan Approval #

Approval Date (mm-dd-yyyy)

| Hicap Permanent Well # | Common Well # | Specific Capacity |
|---|---|---|
| | | 0.1 |

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

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

**1. Well Location**

| Town of JACKSONPORT | Fire # (if avail.) 5682 |
|---|---|

Street Address or Road Name and Number: 5682 CLARKS LAKE DR

| Subdivision Name | Lot # | Block # |
|---|---|---|
| | | |

| Latitude / Longitude in Decimal Degree (DD) | Method Code |
|---|---|
| 44.9456 °N -87.20365 °W | GPS006 |

| SE NW or Govt Lot # | Section | Township | Range |
|---|---|---|---|
| | 34 | 29 N | 27 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.) |
|---|---|---|
| 9.87 | Surface | 49 |
| 8 | 49 | 140 |
| 6 | 140 | 263 |

| Upper Enlarged Drillhole | | Lower Open Bedrock |
|---|---|---|
| Yes | Rotary - Mud Circulation ..... | No |
| Yes | Rotary - Air ..... | Yes |
| No | Rotary - Air & Foam ..... | No |
| No | Drill-Through Casing Hammer | |
| No | Reverse Rotary | |
| No | Cable-tool Bit ____in. dia... | No |
| No | Dual Rotary ..... | No |
| Yes | Temp. Outer Casing 8in. dia | |
| Yes | Removed? 49depth ft. (If NO explain on back side) | |

**8. Geology**

| Geology Codes | Type, Caving/Noncaving, Color, Hardness, etc... | From (ft.) | To (ft.) |
|---|---|---|---|
| T Q Y - | Tan/Brown, Caving, Sand & Gravel | Surface | 16 |
| G V C - | Gray, Non-Caving, Clay | 16 | 47 |
| I H L - | White, Hard/Firm, Limestone/Dolomite | 47 | 263 |

**6. Casing, Liner, Screen**

| Dia. (in.) | Material, Weight, Specification Manufacturer & Method of Assembly | From (ft.) | To (ft.) |
|---|---|---|---|
| 6 | WHEATLAND WR USA ASTM A53/ASME SA53 6.625 X .280 GR BE NSF-61 21' NEW BLACK | Surface | 140 |
| Dia. (in.) | Screen type, material & slot size | From (ft.) | To (ft.) |
| | | | |

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

**10. Pump Test**
Pumping level 140 ft. below surface
Pumping at 10 GP M for 1 Hrs.
Pumping Method ?

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

**7. Grout or Other Sealing Material**
Method Bradenhead

| Kind of Sealing Material | From (ft.) | To (ft.) | # Sacks Cement |
|---|---|---|---|
| Neat cement grout | Surface | 140 | 56 S |

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

Filled & Sealed Well(s) as needed?

| 13. Constructor / Supervisory Driller | Lic # | Date Signed |
|---|---|---|
| RM | | 12-31-2015 |
| Drill Rig Operator | Lic or Reg # | Date Signed |
| | | |

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

| Type | Qualifier | Distance | Type | Qualifier | Distance |
|---|---|---|---|---|---|
| Foundation Drain to Clearwater | | 14 | Sewer - Building Sanitary | | 14 |
| | | | Septic or Holding, or POWTS Tank | | 30 |

Comment:

Created On: 01-12-2016 Updated On: 12-03-2019 Review Status: APPROVED