Well Construction Report
WISCONSIN UNIQUE WELL NUMBER VE677

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

Form 3300-077A

Property Owner: SCHWANKE, JIM			Phone #
Mailing Address: 33 W 10TH ST			
City: BUFFALO CITY	State: WI	Zip Code: 54629	
County: Buffalo	Co. Permit #:	Notification #: 39974343	Completed: 04-14-2011

1. Well Location

City of BUFFALO CITY

Fire # (if avail.)

Street Address or Road Name and Number: 33 W 10TH ST

Subdivision Name	Lot #	Block #

Well Constructor (Business Name)	Lic. #	Facility ID # (Public Wells)
VIRGIL SCHAFFNER JR	4644	

Latitude / Longitude in Decimal Degree (DD): 44.23028 °N -91.85917 °W

Method Code: GPS008

Address: SCHAFFNERS PLBG & HTG
FOUNTAIN CITY WI 54629-0128

Well Plan Approval #:

Approval Date (mm-dd-yyyy):

NW	NE	Section	Township	Range
or Govt Lot #		7	20 N	12 W

2. Well Type Replacement

of previous unique well #: constructed in

Hicap Permanent Well #	Common Well #	Specific Capacity

Reason for replaced or reconstructed well ?

PLUGGED SCREEN

3. Well serves 1 # of

Private,potable

Heat Exchange____# of drillholes

Hicap Well ? No

Hicap Property ? No

Hicap Potable ?

Construction Type: Driven Point

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
  Removed? ____depth ft. (If NO explain on back side)

8. Geology

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
1.25	STEEL	Surface	31
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
1.25	60 GAUZE	31	34

9. Static Water Level

12 ft. below ground surface

11. Well Is

14 in. above grade

Developed ? Yes

Disinfected ? Yes

Capped ? Yes

10. Pump Test

Pumping level _____ ft. below surface

Pumping at _____ GP for _____ Hrs.

Pumping Method ?

7. Grout or Other Sealing Material

Method

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
	Surface		

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? Yes

13. Constructor / Supervisory Driller	Lic #	Date Signed
VS		06-10-2011
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
POWTS dispersal component (soil absorption unit or mound)	>	50	Landfill	>	1200
Building Overhang		6	Septic or Holding, or POWTS Tank	>	25

Comment:

Created On: 08-16-2011 Updated On: 02-09-2023 Review Status: