

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				WS572		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A			
Property Owner ADOMATIS, ELAINE						Phone #		1. Well Location				Fire # (if avail.)	
Mailing Address 2677 EDDIES DR						Town of DRAPER							
City EAGLE RIVER						State WI		Zip Code 54521					
County Sawyer		Co. Permit #		Notification # 40968037		Completed 07-04-2011		Subdivision Name				Lot # Block #	
Well Constructor (Business Name) JEFFREY J HOLT				Lic. # 5891		Facility ID # (Public Wells)		Latitude / Longitude in Decimal Degree (DD)				Method Code	
Address HOLT WELL DRILLING PARK FALLS WI 54552-1390				Well Plan Approval #		Approval Date (mm-dd-yyyy)		SW SE		Section Township		Range	
								or Govt Lot # 2		39 N		4 W	
Hicap Permanent Well #		Common Well #		Specific Capacity 0.3		2. Well Type Replacement of previous unique well # constructed in Reason for replaced or reconstructed well ? Construction Type Drilled							
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													
Dia. (in.)		From (ft.)		To (ft.)		Upper Enlarged Drillhole		Lower Open Bedrock		8. Geology			
6		Surface		91		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)				Geology Codes			
										Type, Caving/Noncaving, Color, Hardness, etc...			
										From (ft.) To (ft.)			
										- - C - CLAY Surface 22			
										- - P - HARDPAN 22 85			
										- - G - GRAVEL 85 91			
6. Casing, Liner, Screen													
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		9. Static Water Level			
6		ASTM A53B PE IPSO				Surface		91		30 ft. below ground surface			
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		11. Well Is			
										18 in. above grade			
										Developed ? Yes			
										Disinfected ? Yes			
										Capped ? Yes			
										Pumping Method ?			
7. Grout or Other Sealing Material													
Method MOUND													
Kind of Sealing Material		From (ft.)		To (ft.)		# Sacks Cement		12. Notified Owner of need to fill & seal ?					
GRANULAR BENTONITE		Surface						Filled & Sealed Well(s) as needed? Yes					
13. Constructor / Supervisory Driller													
JJH		Lic #		Date Signed									
Drill Rig Operator		Lic or Reg #		Date Signed									

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Overhang		30	Septic or Holding, or POWTS Tank		30

Comment:

Created On: 08-02-2011

Updated On: 08-02-2011

Review Status: