

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				WV352		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707 Form 3300-077A			
Property Owner PROFAB MACHINE					Phone #				
Mailing Address 791 190TH ST					1. Well Location				
City BALDWIN State WI Zip Code 54002					Town of HAMMOND Fire # (if avail.) 791				
County St. Croix Co. Permit # Notification # 49520234 Completed 10-15-2013					Street Address or Road Name and Number 791 190TH ST				
Well Constructor (Business Name) AUNE WELL DRILLING INC Lic. # 95 Facility ID # (Public Wells)					Subdivision Name Lot # Block #				
Address 1171 CNTY RD T HAMMOND WI 54015-4827					Latitude / Longitude in Decimal Degree (DD) 44.97677 °N -92.4148 °W Method Code GPS008				
Hicap Permanent Well # Common Well # Specific Capacity 1					NW NW Section Township Range or Govt Lot # 26 29 N 17 W				
3. Well serves 1 # of SHOP Private, potable Heat Exchange ___ # of drillholes					Well Plan Approval # Approval Date (mm-dd-yyyy) Hicap Well ? No Hicap Property ? No Hicap Potable ? No				
					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.)	Upper Enlarged Drillhole		Lower Open Bedrock		8. Geology		
10	Surface	52	<u>No</u> Rotary - Mud Circulation		<u>No</u>		Geology Codes Type, Caving/Noncaving, Color, Hardness, etc...		
6	52	145	<u>No</u> Rotary - Air		<u>No</u>		- - Z -	CLAY & GRAVEL	From (ft.) To (ft.)
			<u>Yes</u> Rotary - Air & Foam		<u>Yes</u>		T S N -	SANDROCK WHITE/BRN SOFT	14 52
			<u>No</u> Drill-Through Casing Hammer				Y H L -	LIMEROCK BROWN/YELLOW HARD	52 145
			<u>No</u> Reverse Rotary						
			<u>No</u> Cable-tool Bit ___ in. dia...		<u>No</u>				
			<u>No</u> Dual Rotary		<u>No</u>				
			<u>No</u> Temp. Outer Casing ___ in. dia						
			<u>No</u> Removed? ___ depth ft. (If NO explain on back side)						
6. Casing, Liner, Screen									
Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly		From (ft.)	To (ft.)	9. Static Water Level				
6	STL HVV 18.97 A53		Surface	54	85 ft. below ground surface				
Dia. (in.)	Screen type, material & slot size		From (ft.)	To (ft.)	10. Pump Test				
					Pumping level 110 ft. below surface				
					Pumping at 25 GP M for 2 Hrs.				
					Pumping Method ?				
7. Grout or Other Sealing Material					11. Well Is				
Method PRES TREMIE					12 in. above grade				
Kind of Sealing Material		From (ft.)	To (ft.)	# Sacks Cement	Developed ? Yes				
NEAT CEMENT		Surface	52	17 S	Disinfected ? Yes				
					Capped ? Yes				
					12. Notified Owner of need to fill & seal ? No				
					Filled & Sealed Well(s) as needed? No				
					13. Constructor / Supervisory Driller Lic # Date Signed				
					TA 10-15-2013				
					Drill Rig Operator Lic or Reg # Date Signed				
					RL				

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)	>	100	Building Overhang		50
			Septic or Holding, or POWTS Tank		50

Comment:

Created On: 12-13-2013

Updated On: 04-26-2022

Review Status: