Well Construction Report
WISCONSIN UNIQUE WELL NUMBER WW020

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

Form 3300-077A

Property Owner: RAMEY, WILL			Phone #
Mailing Address: 9884 171ST ST			
City: CHIPPEWA FALLS	State: WI	Zip Code: 54729	
County: Barron	Co. Permit #:	Notification #: 6492353301	Completed: 09-12-2017

Well Constructor (Business Name): TOM GUSTUM	Lic. #: 4813	Facility ID # (Public Wells):	
Address: GUSTUM SEPTIC SERVICE NEW AUBURN WI 54757-9326		Well Plan Approval #:	
		Approval Date (mm-dd-yyyy):	
Hicap Permanent Well #:	Common Well #:	Specific Capacity:	

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

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

1. Well Location

City of CHETEK

Fire # (if avail.): 400

Street Address or Road Name and Number: RUSSELL ST

Subdivision Name:	Lot #: 15	Block #:

Latitude / Longitude in Decimal Degree (DD): 45.3213 °N -91.6398 °W
Method Code: GCD013

NW NW or Govt Lot #	Section: 29	Township: 33 N	Range: 10 W

2. Well Type New Well
of previous unique well # constructed in

Reason for replaced or reconstructed well ?

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

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	SCH 40 STEEL	Surface	26
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
1.25	SS 10 SLOT	26	29

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	29

9. Static Water Level
4.5 ft. below ground surface

10. Pump Test
Pumping level _____ ft. below surface
Pumping at 6 GP M for 1 Hrs.
Pumping Method ?

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

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed?

13. Constructor / Supervisory Driller	Lic #	Date Signed
TG		09-25-2017
Drill Rig Operator	**Lic or Reg #**	**Date Signed**

4a. Potential Contamination Sources Is the well located in floodplain ? Yes

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		70	Shoreline/Pool		38

Comment:

Created On: 11-02-2017 Updated On: 06-18-2020 Review Status: