

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				WX117		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A									
Property Owner GONZALEZ, JERRY						Phone #		1. Well Location				Fire # (if avail.)							
Mailing Address 10730 N GAZEBO HILL PKWY E						City of MEQUON													
City MEQUON						State WI		Zip Code 53092											
County Ozaukee		Co. Permit #		Notification # 50114784		Completed 12-02-2013		Subdivision Name				Lot #		Block #					
Well Constructor (Business Name) LIEBAU LAUN INC				Lic. # 527		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD) 43.214 °N -87.9574 °W				Method Code GCD013					
Address 1200 W LIEBAU RD 124N MEQUON WI 53092-3334				Well Plan Approval #		SE NW		Section 25		Township 9 N		Range 21 E							
						or Govt Lot #													
Approval Date (mm-dd-yyyy)				2. Well Type New Well				of previous unique well #				constructed in							
Hicap Permanent Well #		Common Well #		Specific Capacity 0.2		Reason for replaced or reconstructed well ?													
3. Well serves 1 # of						Hicap Well ? No													
Private, potable						Hicap Property ? No													
Heat Exchange ___ # of drillholes						Hicap Potable ?		Construction Type Drilled											
4. Potential Contamination Sources - ON REVERSE SIDE																			
5. Drillhole Dimensions and Construction Method												8. Geology							
Dia. (in.)		From (ft.)		To (ft.)		Upper Enlarged Drillhole		Lower Open Bedrock		Geology Codes		Type, Caving/Noncaving, Color, Hardness, etc...		From (ft.)		To (ft.)			
6		Surface		505		Rotary - Mud Circulation				- - C G		CLAY & STONES		Surface		140			
						<u>No</u> Rotary - Air		<u>Yes</u>		- - P -		HARD PAN		140		146			
						<u>Yes</u> Rotary - Air & Foam		<u>No</u>		- - L -		LIMESTONE		146		505			
						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)													
6. Casing, Liner, Screen												9. Static Water Level				11. Well Is			
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		110 ft. below ground surface				16 in. above grade					
6		ASTM A53-B .280 EXL TUBE 18.97LBS/FT P.E. WELDED				Surface		146		10. Pump Test				Developed ? Yes					
										Pumping level 190 ft. below surface				Disinfected ? Yes					
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping at 12 GP M for 2 Hrs.				Capped ? Yes					
										Pumping Method ?									
7. Grout or Other Sealing Material												12. Notified Owner of need to fill & seal ?							
Method MOUNDED												Filled & Sealed Well(s) as needed?							
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement		13. Constructor / Supervisory Driller				Lic #		Date Signed			
GRANULAR BENTONITE				Surface		2		S		AL						12-03-2013			
												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		25	Foundation Drain to Clearwater		40
Clearwater Sump		50	Sewer - Building Sanitary		75

Comment:

Created On: 01-02-2014

Updated On: 07-15-2019

Review Status: