

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				XA198		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A									
Property Owner PREGONT, JOE & TINA						Phone #		1. Well Location				Fire # (if avail.)							
Mailing Address W2893 ORCHARD AVE						Town of BROOKLYN						W2893							
City GREEN LAKE						State WI		Zip Code 54941				Street Address or Road Name and Number ORCHARD AVE							
County Green Lake		Co. Permit #		Notification # 49687324		Completed 11-07-2013		Subdivision Name				Lot #		Block #					
Well Constructor (Business Name) CENTRAL WELL DRILLING INC				Lic. # 4231		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD) 43.8056 °N -89.0273 °W				Method Code GCD013					
Address PO BOX 405 400 S WOODWARD ST BRANDON WI 53919-0405				Well Plan Approval #				NE NE		Section 2		Township 15 N		Range 12 E					
				Approval Date (mm-dd-yyyy)				or Govt Lot #											
Hicap Permanent Well #		Common Well #		Specific Capacity 1.8		2. Well Type New Well				of previous unique well # constructed in									
3. Well serves 1 # of GARAGE & HOME				Hicap Well ? No		Reason for replaced or reconstructed well ?													
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.)	
8.8		Surface		83		<u>Yes</u> Rotary - Mud Circulation				<u>No</u>		- - C S		SANDY CLAY		Surface		10	
6		83		187		<u>No</u> Rotary - Air				<u>Yes</u>		- S N H		SOFT SHALEY SANDROCK		10		71	
						Rotary - Air & Foam						- - N -		SANDROCK		71		187	
						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.)		18 ft. below ground surface				18 in. above grade					
6		NEW BLACK STEEL ASTM A53B PE USA EXL-TUBE				Surface		83		10. Pump Test				Developed ? Yes					
										Pumping level 35 ft. below surface				Disinfected ? Yes					
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping at 30 GP M for 2 Hrs.				Capped ? Yes					
										Pumping Method ?									
7. Grout or Other Sealing Material												12. Notified Owner of need to fill & seal ?							
Method TREMIE PUMPED												Filled & Sealed Well(s) as needed?							
Kind of Sealing Material		From (ft.)		To (ft.)		# Sacks Cement		N/A											
CEMENT		Surface		83		15 S													
												13. Constructor / Supervisory Driller				Lic #		Date Signed	
												SS						11-07-2013	
												Drill Rig Operator				Lic or Reg #		Date Signed	

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)	>	70	Shoreline/Pool	>	200
Building Overhang	>	50	Septic or Holding, or POWTS Tank	>	50

Comment:

Created On: 11-27-2013

Updated On: 10-03-2019

Review Status: