Well Construction Report
WISCONSIN UNIQUE WELL NUMBER XB293

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

Form 3300-077A

Property Owner: WELCH, MIKE			Phone #
Mailing Address: 4327 DAISY LN			
City: EAGLE RIVER	State: WI	Zip Code: 54521	
County: Vilas	Co. Permit #	Notification #: 50125095	Completed: 11-26-2013

Well Constructor (Business Name): ARTHUR (BUTCH) P SIMAC	Lic. #: 4084	Facility ID # (Public Wells)	
Address: PO BOX 961 EAGLE RIVER WI 54521-0961		Well Plan Approval #	
		Approval Date (mm-dd-yyyy)	
Hicap Permanent Well #	Common Well #	Specific Capacity	

1. Well Location

Town of LINCOLN					Fire # (if avail.): 4327
Street Address or Road Name and Number: 4327 DAISY LN					
Subdivision Name			Lot #		Block #
Latitude / Longitude in Decimal Degree (DD): 45.90355 °N -89.2294 °W					Method Code: GPS008
SW	SE	Section: 34	Township: 40 N		Range: 10 E
or Govt Lot #					

2. Well Type Replacement

of previous unique well # constructed in

Reason for replaced or reconstructed well ?

PLUGGED POINT

Construction Type: Driven Point

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

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.)
2	STEEL	Surface	32
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
2	10 SLOT	28	32

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	32

9. Static Water Level

16 ft. below ground surface

10. Pump Test

Pumping level 16 ft. below surface

Pumping at 8 GP M for 12 Hrs.

Pumping Method ?

11. Well Is

12 in. above grade

Developed ? Yes

Disinfected ? Yes

Capped ? Yes

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? Yes

13. Constructor / Supervisory Driller	Lic #	Date Signed
BS		11-26-2013
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
BS		11-26-2013

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		100	Building Overhang		6
			Septic or Holding, or POWTS Tank		75

Comment:

Created On: 01-02-2014 Updated On: 06-30-2020 Review Status: