Well Construction Report
WISCONSIN UNIQUE WELL NUMBER XB294

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

Form 3300-077A

Property Owner: HARTH, JOHN			Phone #
Mailing Address: 5125 TORCH LK RD			
City: CONOVER	State: WI	Zip Code: 54519	
County: Vilas	Co. Permit #:	Notification #: 51666070	Completed: 05-29-2014

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:	

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

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

1. Well Location
Town of CONOVER

Fire # (if avail.)

Street Address or Road Name and Number
5125 TORCH LK RD

Subdivision Name	Lot #	Block #

Latitude / Longitude in Decimal Degree (DD)				Method Code
46.02043 °N	-89.27607 °W			GPS008

NE NW or Govt Lot #	Section	Township	Range
	20	41 N	10 E

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

Reason for replaced or reconstructed well ?
PLUGGED

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

8. Geology

Geology Codes	Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
- - S -	SAND	Surface	30

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	30
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
2	10 SLOT	26	30

7. Grout or Other Sealing Material
Method

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
	Surface		

9. Static Water Level
12 ft. below ground surface

10. Pump Test
Pumping level 12 ft. below surface
Pumping at 4 GP for 6 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		05-29-2014
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
BS		

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)		150	Shoreline/Pool		250
Building Overhang		14	Septic or Holding, or POWTS Tank		100

Comment:

Created On: 07-10-2014 Updated On: 07-10-2014 Review Status: