

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				XE213		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A					
Property Owner CASEY, TIM						Phone # (715)213-2049		1. Well Location				Fire # (if avail.)			
Mailing Address 4365 STERLING DR						Village of PLOVER						4365			
City PLOVER						State WI		Zip Code 54467				Street Address or Road Name and Number			
City PLOVER						State WI		Zip Code 54467				4365 STERLING DR			
County		Co. Permit #		Notification #		Completed		Subdivision Name				Lot #			
Portage				6869878401		07-03-2017									
Well Constructor (Business Name)				Lic. #		Facility ID # (Public Wells)		Latitude / Longitude in Decimal Degree (DD)				Method Code			
PETER LASKOWSKI				4789				44.4576 °N -89.5789 °W				GCD013			
Address CHETS PLBG & HTG INC STEVENS POINT WI 54481-5670				Well Plan Approval #		SW SE		Section Township		Range					
				Approval Date (mm-dd-yyyy)		20 23 N		8 E							
Hicap Permanent Well #				Common Well #		Specific Capacity		2. Well Type New Well				of previous unique well # constructed in			
Reason for replaced or reconstructed well ?															
3. Well serves 1 # of IRR SYSTEM				Hicap Well ? No		Private, non-potable Irrigation		Hicap Property ? No		Reason for replaced or reconstructed well ?					
Heat Exchange ___ # of drillholes				Hicap Potable ?				Construction Type Driven Point							
4. Potential Contamination Sources - ON REVERSE SIDE															
5. Drillhole Dimensions and Construction Method														8. Geology	
Upper Enlarged Drillhole				Lower Open Bedrock				Geology Codes		Type, Caving/Noncaving, Color, Hardness, etc...		From (ft.) To (ft.)			
Rotary - Mud Circulation								- - S -		SAND		Surface 32			
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)				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				14 in. above grade					
2		STEEL		Surface 28		10. Pump Test				Developed ? Yes					
Dia. (in.)		Screen type, material & slot size		From (ft.) To (ft.)		Pumping level 18 ft. below surface				Disinfected ? Yes					
2		10 SLOT ST ST		28 32		Pumping at 35 GP M for 1 Hrs.				Capped ? No					
						Pumping Method ?									
7. Grout or Other Sealing Material												12. Notified Owner of need to fill & seal ?			
Method															
Kind of Sealing Material				From (ft.) To (ft.) # Sacks Cement		Filled & Sealed Well(s) as needed?				No					
				Surface											
NEW WELL															
13. Constructor / Supervisory Driller								Lic #		Date Signed					
BL										07-03-2017					
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		80	Downspout/Yard Hydrant		50
			Sewer - Building Sanitary		150

Comment:

Created On: 07-25-2017

Updated On: 05-07-2020

Review Status: