

|                                                                        |  |                                                                      |  |                            |  |                                                                                                                             |  |                         |  |                                                                         |  |                                                        |  |                                                 |  |                    |  |             |  |
|------------------------------------------------------------------------|--|----------------------------------------------------------------------|--|----------------------------|--|-----------------------------------------------------------------------------------------------------------------------------|--|-------------------------|--|-------------------------------------------------------------------------|--|--------------------------------------------------------|--|-------------------------------------------------|--|--------------------|--|-------------|--|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b> |  |                                                                      |  | <b>XH341</b>               |  | <b>Drinking Water and Groundwater - DG/5</b><br><b>Department of Natural Resources, Box 7921</b><br><b>Madison WI 53707</b> |  |                         |  | Form 3300-077A                                                          |  |                                                        |  |                                                 |  |                    |  |             |  |
| Property Owner PESKIE, DOROTHY                                         |  |                                                                      |  |                            |  | Phone #                                                                                                                     |  | <b>1. Well Location</b> |  |                                                                         |  | Fire # (if avail.)                                     |  |                                                 |  |                    |  |             |  |
| Mailing Address 9757 CO RD D                                           |  |                                                                      |  |                            |  | Town of BELMONT                                                                                                             |  |                         |  |                                                                         |  | 9757                                                   |  |                                                 |  |                    |  |             |  |
| City ALMOND                                                            |  |                                                                      |  |                            |  | State WI                                                                                                                    |  | Zip Code 54909          |  |                                                                         |  | Street Address or Road Name and Number<br>CO RD D      |  |                                                 |  |                    |  |             |  |
| County                                                                 |  | Co. Permit #                                                         |  | Notification #             |  | Completed                                                                                                                   |  | Subdivision Name        |  |                                                                         |  | Lot #                                                  |  | Block #                                         |  |                    |  |             |  |
| Portage                                                                |  |                                                                      |  | 49511982                   |  | 10-14-2013                                                                                                                  |  |                         |  |                                                                         |  |                                                        |  |                                                 |  |                    |  |             |  |
| Well Constructor (Business Name)<br>JOHN D ZOUSKI                      |  |                                                                      |  | Lic. #<br>6417             |  | Facility ID # (Public Wells)                                                                                                |  |                         |  | Latitude / Longitude in Decimal Degree (DD)<br>44.30855 °N -89.29725 °W |  |                                                        |  | Method Code<br>GPS008                           |  |                    |  |             |  |
| Address PO BOX 322<br>PLAINFIELD WI 54966                              |  |                                                                      |  | Well Plan Approval #       |  |                                                                                                                             |  | SE NW                   |  | Section 9                                                               |  | Township 21 N                                          |  | Range 10 E                                      |  |                    |  |             |  |
|                                                                        |  |                                                                      |  | Approval Date (mm-dd-yyyy) |  |                                                                                                                             |  | or Govt Lot #           |  |                                                                         |  |                                                        |  |                                                 |  |                    |  |             |  |
| Hicap Permanent Well #                                                 |  |                                                                      |  | Common Well #              |  | Specific Capacity<br>5                                                                                                      |  |                         |  | <b>2. Well Type</b> Replacement                                         |  |                                                        |  | of previous unique well #                       |  | constructed in     |  |             |  |
|                                                                        |  |                                                                      |  |                            |  |                                                                                                                             |  |                         |  | Reason for replaced or reconstructed well ?<br>NEW WELL                 |  |                                                        |  |                                                 |  |                    |  |             |  |
| <b>3. Well serves</b> 1 # of                                           |  |                                                                      |  | Hicap Well ? No            |  |                                                                                                                             |  |                         |  | Construction Type Drilled                                               |  |                                                        |  |                                                 |  |                    |  |             |  |
| Private, potable                                                       |  |                                                                      |  | Hicap Property ? No        |  |                                                                                                                             |  |                         |  |                                                                         |  |                                                        |  |                                                 |  |                    |  |             |  |
| Heat Exchange ___ # of drillholes                                      |  |                                                                      |  | Hicap Potable ?            |  |                                                                                                                             |  |                         |  |                                                                         |  |                                                        |  |                                                 |  |                    |  |             |  |
| <b>4. Potential Contamination Sources - ON REVERSE SIDE</b>            |  |                                                                      |  |                            |  |                                                                                                                             |  |                         |  |                                                                         |  |                                                        |  |                                                 |  |                    |  |             |  |
| <b>5. Drillhole Dimensions and Construction Method</b>                 |  |                                                                      |  |                            |  |                                                                                                                             |  |                         |  |                                                                         |  | <b>8. Geology</b>                                      |  |                                                 |  |                    |  |             |  |
| 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                                                              |  | 121                        |  |                                                                                                                             |  |                         |  |                                                                         |  | - - Y -                                                |  | SAND & GRAVEL                                   |  | Surface            |  | 50          |  |
|                                                                        |  |                                                                      |  |                            |  | Rotary - Mud Circulation .....                                                                                              |  |                         |  |                                                                         |  | - - C -                                                |  | CLAY                                            |  | 50                 |  | 75          |  |
|                                                                        |  |                                                                      |  |                            |  | Rotary - Air .....                                                                                                          |  |                         |  |                                                                         |  | - - Y -                                                |  | SAND & GRAVEL                                   |  | 75                 |  | 121         |  |
|                                                                        |  |                                                                      |  |                            |  | Rotary - Air & Foam .....                                                                                                   |  |                         |  |                                                                         |  |                                                        |  |                                                 |  |                    |  |             |  |
|                                                                        |  |                                                                      |  |                            |  | <u>Yes</u> 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)                                                                         |  |                         |  |                                                                         |  |                                                        |  |                                                 |  |                    |  |             |  |
| <b>6. Casing, Liner, Screen</b>                                        |  |                                                                      |  |                            |  |                                                                                                                             |  |                         |  |                                                                         |  | <b>9. Static Water Level</b>                           |  |                                                 |  | <b>11. Well Is</b> |  |             |  |
| Dia. (in.)                                                             |  | Material, Weight, Specification<br>Manufacturer & Method of Assembly |  |                            |  | From (ft.)                                                                                                                  |  | To (ft.)                |  | 84 ft. below ground surface                                             |  |                                                        |  | 20 in. above grade                              |  |                    |  |             |  |
| 6                                                                      |  | IPSCO A53 6.625X.280 WALL WELDED<br>TOGETHER WEIGHT-2238.5           |  |                            |  | Surface                                                                                                                     |  | 118                     |  | <b>10. Pump Test</b>                                                    |  |                                                        |  | Developed ? Yes                                 |  |                    |  |             |  |
|                                                                        |  |                                                                      |  |                            |  |                                                                                                                             |  |                         |  | Pumping level 87 ft. below surface                                      |  |                                                        |  | Disinfected ? Yes                               |  |                    |  |             |  |
| Dia. (in.)                                                             |  | Screen type, material & slot size                                    |  |                            |  | From (ft.)                                                                                                                  |  | To (ft.)                |  | Pumping at 15 GP M for 1 Hrs.                                           |  |                                                        |  | Capped ? Yes                                    |  |                    |  |             |  |
| 6                                                                      |  | #12 ALLOY S&S                                                        |  |                            |  | 118                                                                                                                         |  | 121                     |  | Pumping Method ?                                                        |  |                                                        |  |                                                 |  |                    |  |             |  |
| <b>7. Grout or Other Sealing Material</b>                              |  |                                                                      |  |                            |  |                                                                                                                             |  |                         |  |                                                                         |  | <b>12. Notified Owner of need to fill &amp; seal ?</b> |  |                                                 |  |                    |  |             |  |
| Method                                                                 |  |                                                                      |  |                            |  |                                                                                                                             |  |                         |  |                                                                         |  |                                                        |  |                                                 |  |                    |  |             |  |
| Kind of Sealing Material                                               |  |                                                                      |  | From (ft.)                 |  | To (ft.)                                                                                                                    |  | # Sacks Cement          |  |                                                                         |  | Filled & Sealed Well(s) as needed?                     |  |                                                 |  | Yes                |  |             |  |
| BENT ALONG CASING                                                      |  |                                                                      |  | Surface                    |  |                                                                                                                             |  |                         |  |                                                                         |  |                                                        |  |                                                 |  |                    |  |             |  |
|                                                                        |  |                                                                      |  |                            |  |                                                                                                                             |  |                         |  |                                                                         |  | <b>13. Constructor / Supervisory Driller</b>           |  |                                                 |  | Lic #              |  | Date Signed |  |
|                                                                        |  |                                                                      |  |                            |  |                                                                                                                             |  |                         |  |                                                                         |  | JDZ                                                    |  |                                                 |  |                    |  | 10-21-2013  |  |
|                                                                        |  |                                                                      |  |                            |  |                                                                                                                             |  |                         |  |                                                                         |  | Drill Rig Operator                                     |  |                                                 |  | Lic or Reg #       |  | Date Signed |  |
|                                                                        |  |                                                                      |  |                            |  |                                                                                                                             |  |                         |  |                                                                         |  |                                                        |  |                                                 |  |                    |  |             |  |

**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) |           | 55       | Building Overhang                |           | 12       |
|                                                           |           |          | Septic or Holding, or POWTS Tank |           | 38       |

Comment:

Created On: 11-15-2013

Updated On: 05-07-2020

Review Status: