Well Construction Report
WISCONSIN UNIQUE WELL NUMBER XL036

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

Form 3300-077A

Property Owner: MALY, ED			Phone #: (262)367-4312
Mailing Address: 275 CARDINAL LN			
City: HARTLAND	State: WI	Zip Code: 53029	
County: Marinette	Co. Permit #:	Notification #: 52174159	Completed: 07-12-2014

Well Constructor (Business Name): JEFFREY J NISLEIT	Lic. #: 4475	Facility ID # (Public Wells):	
Address: JJ'S PLUMBING & PUMPS, CRIVITZ WI 54114		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 STEPHENSON

Fire # (if avail.): W1296

Street Address or Road Name and Number: PARKWAY

Subdivision Name	Lot #	Block #

Latitude / Longitude in Decimal Degree (DD)	Method Code
45.36943 °N -88.24793 °W	GPS006

NW NE or Govt Lot #	Section	Township	Range
	4	33 N	18 E

2. Well Type Replacement
of previous unique well # constructed in 1975

Reason for replaced or reconstructed well ?
PLUGGED SCREEN

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	38

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	35
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
2	POINT 69 GAUGE	35	38

7. Grout or Other Sealing Material

Method

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

9. Static Water Level
20 ft. below ground surface

10. Pump Test
Pumping level _____ ft. below surface
Pumping at 5 GP for 3 Hrs.
Pumping Method ?

11. Well Is
24 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
JN		08-07-2014
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)		80	Sewer - Building Sanitary		36
			Septic or Holding, or POWTS Tank		65

Comment:

Created On: 10-01-2014 Updated On: 10-01-2014 Review Status: