Well Construction Report
WISCONSIN UNIQUE WELL NUMBER XQ124

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

Form 3300-077A

Property Owner: BECKER, ED			Phone #
Mailing Address: 480 ORISKANY CT			
City: OSPREY	State: FL	Zip Code: 34229	
County: Juneau	Co. Permit #:	Notification #: 6608622801	Completed: 10-18-2016

1. Well Location

Town of GERMANTOWN			Fire # (if avail.): N7142
Street Address or Road Name and Number: N7142 BIRCH TRL			
Subdivision Name: LITTLE PINES		Lot #:	Block #:

Well Constructor (Business Name): FRANK E KRANZ	Lic. #: 4071	Facility ID # (Public Wells):	Latitude / Longitude in Decimal Degree (DD): 43.9027 °N -90.0315 °W
			Method Code: GPS008
		Well Plan Approval #:	SE NW or Govt Lot #: — Section: 33 Township: 17 N Range: 4 E
Address: W5528 49TH ST MAUSTON WI 53948		Approval Date (mm-dd-yyyy):	
Hicap Permanent Well #:	Common Well #:	Specific Capacity:	

2. Well Type Replacement

of previous unique well # constructed in

Reason for replaced or reconstructed well ?

CLOGGED WELL 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

Dia. (in.)	From (ft.)	To (ft.)
1.25	Surface	26

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
  - Removed? ____depth ft. (If NO

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
1.25		Surface	26
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
1.25	SLOTTED, SS, 11	26	29

7. Grout or Other Sealing Material

Method

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
OLD WELL REMOVED SAME HOLE FOR NEW WELL	Surface	26	29 S

8. Geology

9. Static Water Level

6 ft. below ground surface

10. Pump Test

Pumping level _____ ft. below surface

Pumping at _____ GP for _____ 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
FK		10-18-2016
Drill Rig Operator	**Lic or Reg #**	**Date Signed**

4a. Potential Contamination Sources Is the well located in floodplain ?

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		51	Septic or Holding, or POWTS Tank		28

Comment:

Created On: 12-02-2016 Updated On: 12-02-2016 Review Status: