

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				XR673		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A																	
Property Owner WATKINS, DAVID					Phone #			1. Well Location				Fire # (if avail.)															
Mailing Address 13 OLD W 21ST ST					Town of CLEARFIELD					W7851																	
City WADSWORTH					State IL		Zip Code 60083					Street Address or Road Name and Number W7851 30TH ST															
County Juneau		Co. Permit #		Notification # 6889767201			Completed 07-27-2017			Subdivision Name			Lot #		Block #												
Well Constructor (Business Name) A & M PLUMBING & PUMP SERVICE LLC				Lic. # 6675		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD) 43.9662 °N -90.1663 °W				Method Code GPS006													
Address N6828 HWY 58 NORTH NEW LISBON WI 53948				Well Plan Approval #				NE NW		Section 8		Township 17 N		Range 3 E													
Hicap Permanent Well #				Common Well #		Specific Capacity				or Govt Lot #				Reason for replaced or reconstructed well ?													
3. Well serves 1 # of				Hicap Well ? No				Private, potable				Hicap Property ? No															
Heat Exchange ___ # of drillholes				Hicap Potable ?				Construction Type Driven Point				2. Well Type New Well															
of previous unique well #				constructed in				of previous unique well #				constructed in															
Reason for replaced or reconstructed well ?				Reason for replaced or reconstructed well ?				Reason for replaced or reconstructed well ?				Reason for replaced or reconstructed well ?															
4. Potential Contamination Sources - ON REVERSE SIDE														8. Geology													
5. Drillhole Dimensions and Construction Method														Geology Codes				Type, Caving/Noncaving, Color, Hardness, etc...				From (ft.)		To (ft.)			
Dia. (in.)		From (ft.)		To (ft.)		Upper Enlarged Drillhole				Lower Open Bedrock				-		-		S		-		SAND		Surface		30	
1.25		Surface		30		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 explain on back side)				-				-				-		-		-		-			
6. Casing, Liner, Screen														9. Static Water Level				11. Well Is									
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		6 ft. below ground surface				14 in. above grade													
1.25		GALV/230/ASTM F480/T&C				Surface		27		10. Pump Test				Developed ?													
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping level 6 ft. below surface				Disinfected ?													
1.25		STAINLESS 80 GAUGE				27		30		Pumping at 12 GP M for 1 Hrs.				Capped ?													
Pumping Method ?		Pumping Method ?				Pumping Method ?				Pumping Method ?				Pumping Method ?													
7. Grout or Other Sealing Material														12. Notified Owner of need to fill & seal ?				13. Constructor / Supervisory Driller				Lic #		Date Signed			
Method														Filled & Sealed Well(s) as needed?				AT				12-14-2017					
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement				Drill Rig Operator				Lic or Reg #		Date Signed									
Surface				Surface		Surface		Surface				Surface				Surface		Surface									

4a. Potential Contamination Sources

Is the well located in floodplain ? No

Comment:

Created On: 04-17-2018

Updated On: 04-19-2018

Review Status: