

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				XT331		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A																																							
Property Owner BENSON, MIKE						Phone #		1. Well Location				Fire # (if avail.)																																					
Mailing Address 7410 GLEASON RD						Town of MILLTOWN						1837																																					
City EDINA						State MN		Zip Code 55439				Street Address or Road Name and Number																																					
1837 PINE ISLAND PARK CT						Subdivision Name				Lot #		Block #																																					
PINE ISLAND PARK						14				NA																																							
Well Constructor (Business Name)						Lic. #		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD)		Method Code																																			
LARRY C COX						5324						45.4745 °N -92.4357 °W		GCD013																																			
Address MILLTOWN PUMP SERVICE MILLTOWN WI 54858						Well Plan Approval #		NW SE		Section		Township		Range																																			
						Approval Date (mm-dd-yyyy)		or Govt Lot #		35		35 N		17 W																																			
Hicap Permanent Well #						Common Well #		Specific Capacity				Reason for replaced or reconstructed well ?																																					
								6				PLUGGED SCREEN																																					
3. Well serves 1 # of						Hicap Well ?		No				Construction Type		Driven Point																																			
Private, potable						Hicap Property ?		No																																									
Heat Exchange ___ # of drillholes						Hicap Potable ?																																											
4. Potential Contamination Sources - ON REVERSE SIDE																																																	
5. Drillhole Dimensions and Construction Method														8. Geology																																			
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6. Casing, Liner, Screen														9. Static Water Level		11. Well Is																																	
Removed? ___ depth ft. (If NO explain on back side)														10 ft. below ground surface		12 in. above grade																																	
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Pumping at 7 GP for 1 Hrs.														Capped ? Yes																																			
Pumping Method ?																																																	
7. Grout or Other Sealing Material														12. Notified Owner of need to fill & seal ?																																			
Method GRAVITY														Filled & Sealed Well(s) as needed?		Yes																																	
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LCC														09-23-2015																																			
Drill Rig Operator														Lic or Reg #		Date Signed																																	

4a. Potential Contamination SourcesIs the well located in floodplain ? No

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		50	Foundation Drain to Sewer		25
Building Drain - Sanitary		25	Shoreline/Pool		25
Building Overhang		2	Landfill		1500
Downspout/Yard Hydrant		8	Sewer - Building Sanitary		25
Foundation Drain to Clearwater		25	Septic or Holding, or POWTS Tank		25

Comment: WELL SAMPLE STATES WELL COMPLETION DATE IS 9/1/15, SO I CORRECTED THE WCR FROM 2003. DLR

Created On: 11-11-2015

Updated On: 06-30-2020

Review Status: