

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				XW882		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A									
Property Owner MIELCAREK, MARGARET						Phone #													
Mailing Address 444 MASTERS LN						1. Well Location						Fire # (if avail.)							
City GREEN BAY						State WI		Zip Code 54311				Town of RIVERVIEW		12320					
Street Address or Road Name and Number						12320 W CROOKED LN													
County Oconto		Co. Permit #		Notification #		Completed		Subdivision Name				Lot #		Block #					
Oconto				6994722701		12-07-2017													
Well Constructor (Business Name)				Lic. #		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD)				Method Code					
LLOYD J LEFEBER				6406						45.24527 °N -88.3578 °W				GPS006					
Address LLOYD'S MOUNTAIN PUMP SERVICE MOUNTAIN WI 54149				Well Plan Approval #				NW NE		Section		Township		Range					
				Approval Date (mm-dd-yyyy)				or Govt Lot #		22		32 N		17 E					
Hicap Permanent Well #				Common Well #		Specific Capacity				2. Well Type New Well									
										of previous unique well # constructed in									
										Reason for replaced or reconstructed well ?									
										Construction Type Driven Point									
3. Well serves 1 # of COTTAGE				Hicap Well ? No															
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							
Dia. (in.)		From (ft.)		To (ft.)		Upper Enlarged Drillhole				Lower Open Bedrock		Geology Codes		Type, Caving/Noncaving, Color, Hardness, etc...		From (ft.)		To (ft.)	
2		Surface		32								- - S -		SAND		Surface		32	
						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.)		12 ft. below ground surface				14 in. above grade					
2		T AND C GALV PIPE WHEATLAND				Surface		29		10. Pump Test				Developed ? Yes					
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping level 12 ft. below surface				Disinfected ? Yes					
2		SS #60 MIDWEST (325)				29		32		Pumping at 6 GP M for 2 Hrs.				Capped ? Yes					
										Pumping Method ?									
7. Grout or Other Sealing Material												12. Notified Owner of need to fill & seal ?							
Method																			
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement				Filled & Sealed Well(s) as needed?				No			
				Surface								NONE							
												13. Constructor / Supervisory Driller				Lic #		Date Signed	
												LL						12-17-2017	
												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)		55	Shoreline/Pool		110
			Septic or Holding, or POWTS Tank		48

Comment:

Created On: 01-22-2018

Updated On: 11-15-2019

Review Status: