# Well Construction Report
## *WISCONSIN UNIQUE WELL NUMBER* XZ864

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

Form 3300-077A

| | | | |
|---|---|---|---|
| Property Owner: LAHTI, JOHN | | | Phone #: (715)292-1879 |
| Mailing Address: PO BOX 491 | | | |
| City: IRON RIVER | State: WI | Zip Code: 54847 | |
| County: Bayfield | Co. Permit #: | Notification #: 6964200001 | Completed: 09-30-2017 |

**1. Well Location**

Fire # (if avail.): 7999

Town of TRIPP

Street Address or Road Name and Number: 7999 CHEESE FACTORY RD

| Subdivision Name | Lot # | Block # |
|---|---|---|
| | | |

| Well Constructor (Business Name) | Lic. # | Facility ID # (Public Wells) |
|---|---|---|
| WAYNE HOLLY | 7218 | |

Latitude / Longitude in Decimal Degree (DD): 46.60422 °N -91.40757 °W

Method Code: GPS008

Well Plan Approval #:

| NE | NE | Section | Township | Range |
|---|---|---|---|---|
| or Govt Lot # | | 31 | 48 N | 8 W |

Address: WAYNE HOLLY WELL DRILLING, IRON RIVER WI 54847

Approval Date (mm-dd-yyyy):

**2. Well Type** New Well

of previous unique well #: constructed in

| Hicap Permanent Well # | Common Well # | Specific Capacity |
|---|---|---|
| | | 1.4 |

Reason for replaced or reconstructed well ?

**3. Well serves** 1 # of

Private,potable

Heat Exchange____# of drillholes

Hicap Well ? No

Hicap Property ? No

Hicap Potable ?

Construction Type: Drilled

**4. Potential Contamination Sources - ON REVERSE SIDE**

**5. Drillhole Dimensions and Construction Method**

| Dia. (in.) | From (ft.) | To (ft.) |
|---|---|---|
| 8 | Surface | 6 |
| 4 | 6 | 60 |

Upper Enlarged Drillhole / Lower Open Bedrock

- Rotary - Mud Circulation .....
- Rotary - Air .....
- Rotary - Air & Foam .....
- Drill-Through Casing Hammer
- Reverse Rotary
- Yes / No — Cable-tool Bit ____in. dia...
- Dual Rotary .....
- Temp. Outer Casing ____in. dia
  Removed? ____depth ft. (If NO explain on back side)

**8. Geology**

| Geology Codes | | | | Type, Caving/Noncaving, Color, Hardness, etc... | From (ft.) | To (ft.) |
|---|---|---|---|---|---|---|
| - | - | C | S | SANDY CLAY | Surface | 40 |
| - | - | P | - | HARDPAN | 40 | 57 |
| - | W | S | - | WATER & SAND | 57 | 60 |

**6. Casing, Liner, Screen**

| Dia. (in.) | Material, Weight, Specification Manufacturer & Method of Assembly | From (ft.) | To (ft.) |
|---|---|---|---|
| 4.5 | OD 4IN ID T&C ASTM A-53-B IPSCO | Surface | 57 |
| Dia. (in.) | Screen type, material & slot size | From (ft.) | To (ft.) |
| 2 | 10 SLOT SCREEN 4/2 KPAC | 57 | 60 |

**9. Static Water Level**

13 ft. above ground surface

**10. Pump Test**

Pumping level 20 ft. below surface

Pumping at 10 GP M for 8 Hrs.

Pumping Method ?

**11. Well Is**

24 in. above grade

Developed ? Yes

Disinfected ? Yes

Capped ? Yes

**7. Grout or Other Sealing Material**

Method

| Kind of Sealing Material | From (ft.) | To (ft.) | # Sacks Cement |
|---|---|---|---|
| CASING SEAL | Surface | 6 | S |

**12.** Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed?

| **13.** Constructor / Supervisory Driller | Lic # | Date Signed |
|---|---|---|
| WH | | 10-19-2017 |
| Drill Rig Operator | Lic or Reg # | Date Signed |
| RH | | 10-19-2017 |

**4a. Potential Contamination Sources** Is the well located in floodplain ? No

| Type | Qualifier | Distance | Type | Qualifier | Distance |
|---|---|---|---|---|---|
| Building Overhang | | 48 | Septic or Holding, or POWTS Tank | | 95 |

Comment: FLOW

Created On: 12-21-2017 Updated On: 10-15-2026 Review Status: