

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				YG939		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A													
Property Owner HOFFMAN, LEON						Phone #		1. Well Location				Fire # (if avail.)											
Mailing Address 2361 OMRO ROAD						Town of BAILEYS HARBOR						7399											
City OSHKOSH						State WI		Zip Code 54904				Street Address or Road Name and Number HWY 57											
County		Co. Permit #		Notification #		Completed		Subdivision Name				Lot #		Block #									
Door				49769718		11-15-2013																	
Well Constructor (Business Name)				Lic. #		Facility ID # (Public Wells)		Latitude / Longitude in Decimal Degree (DD)				Method Code											
JORNS HARVEY & DAVID WELL DRLG INC				68				45.03075 °N -87.1484 °W				GPS007											
Address 5235 BLUFF CT STURGEON BAY WI 54235-9790				Well Plan Approval #				Section		Township		Range											
				Approval Date (mm-dd-yyyy)				or Govt Lot # 3		31		30 N		28 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 Drilled															
						0.1																	
3. Well serves 1 # of HOME						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.)		
10			Surface			6			No Rotary - Mud Circulation			No			- - P -		Hardpan		Surface		3		
8			6			171			Yes Rotary - Air			Yes			- - L -		Limestone/Dolomite		3		281		
6			171			281			No Rotary - Air & Foam			No											
									No Drill-Through Casing Hammer														
									No Reverse Rotary														
									No Cable-tool Bit ___ in. dia...			No											
									No Dual Rotary			No											
									Yes Temp. Outer Casing 8in. dia														
									Yes Removed? 7depth 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				12 in. above grade							
6		STANDARD WEIGHT BLACK STEEL CASING. NEW PLAIN END. ASTM-53 WT. PER FT. 18.97 WHEATLAND TUBE						Surface		171		10. Pump Test				Developed ? Yes							
												Pumping level 175 ft. below surface				Disinfected ? Yes							
												Pumping at 20 GP M for 1 Hrs.				Capped ? Yes							
Dia. (in.)		Screen type, material & slot size						From (ft.)		To (ft.)		Pumping Method ?											
7. Grout or Other Sealing Material														12. Notified Owner of need to fill & seal ?									
Method Bradenhead														Filled & Sealed Well(s) as needed?									
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement		SHARED WELL													
Neat cement grout				Surface		171		50 S															
														13. Constructor / Supervisory Driller				Lic #		Date Signed			
														H.J.						11-16-2013			
														Drill Rig Operator				Lic or Reg #		Date Signed			

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Overhang		10	Septic or Holding, or POWTS Tank		95

Comment:

Created On: 12-19-2013

Updated On: 12-19-2013

Review Status: APPROVED