

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				YP722		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A													
Property Owner PORTSIDE PR, NELSON, MIKE						Phone #		1. Well Location				Fire # (if avail.)											
Mailing Address 810 S LANSING AVE								Town of STURGEON BAY				3484											
City STURGEON BAY						State WI		Zip Code 54235				Street Address or Road Name and Number											
County						Co. Permit #		Notification #				Completed											
Door						57429051		01-02-2016				Subdivision Name											
												Lot #											
												Block #											
Well Constructor (Business Name)						Lic. #		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD)											
CHARLIES PUMPS & WELL DRILLING INC						143						Method Code											
Address 1122 ROOSEVELT CT BRUSSELS WI 54204-9553						Well Plan Approval #		NW SW Section Township Range or Govt Lot # 6 27 N 27 E				GCD013											
						Approval Date (mm-dd-yyyy)						2. Well Type Replacement											
Hicap Permanent Well #						Common Well #		Specific Capacity				Reason for replaced or reconstructed well ?											
						0.2																	
3. Well serves 1 # of						Hicap Well ? No																	
Private, potable						Hicap Property ? No																	
Heat Exchange ___ # of drillholes						Hicap Potable ?						Construction Type Drilled											
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.)		
9.87			Surface			38			Yes Rotary - Mud Circulation			No			T Q S -		TAN/BROWN, CAVING, SAND		Surface		15		
8			38			170			Yes Rotary - Air			Yes			G V X -		GRAY, NON-CAVING, SAND & CLAY		15		35		
6			170			283			Rotary - Air & Foam						I H L -		WHITE, HARD/FIRM, LIMESTONE/DOLOMITE		35		283		
									Drill-Through Casing Hammer														
									Reverse Rotary														
									Cable-tool Bit ___ in. dia...														
									Dual Rotary														
									Yes Temp. Outer Casing 8in. dia														
									Yes Removed? 38depth 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.)		1 ft. above ground surface				14 in. above grade							
6		WHEATLAND-WR USA ASTM A53/ASME SA53 6.625X.280 GR BE 21' 6 INCHES SC						Surface		170		10. Pump Test				Developed ? Yes							
												Pumping level 60 ft. below surface				Disinfected ? Yes							
Dia. (in.)		Screen type, material & slot size						From (ft.)		To (ft.)		Pumping at 15 GP M for 1 Hrs.				Capped ? Yes							
												Pumping Method ?											
7. Grout or Other Sealing Material														12. Notified Owner of need to fill & seal ?									
Method BRADENHEAD																							
Kind of Sealing Material						From (ft.)		To (ft.)		# Sacks Cement													
NEAT CEMENT GROUT						Surface		170		56 S						Filled & Sealed Well(s) as needed? Yes							
13. Constructor / Supervisory Driller										Lic #		Date Signed											
												03-10-2016											
Drill Rig Operator										Lic or Reg #		Date Signed											

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Foundation Drain to Clearwater		15	Shoreline/Pool		125

Comment:

Created On: 01-23-2017

Updated On: 12-03-2019

Review Status: