

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				YV007		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A											
Property Owner RAMOS, MICHELLE						Phone # 715344835		1. Well Location				Fire # (if avail.)									
Mailing Address 912 SANDY LANE						Town of HULL						912									
City STEVENS POINT						State WI		Zip Code 54482				Street Address or Road Name and Number SANDY LANE									
County		Co. Permit #		Notification #		Completed		Subdivision Name				Lot #		Block #							
Portage				7385001701		08-30-2018															
Well Constructor (Business Name) SOIK R J PLBG & HTG INC				Lic. # 2868		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD) 44.5267 °N -89.5197 °W				Method Code GCD013							
Address PO BOX 265 1512 WATER ST STEVENS POINT WI 54481-0265				Well Plan Approval #				NE NW		Section 35		Township 24 N		Range 8 E							
				Approval Date (mm-dd-yyyy)				or Govt Lot #													
Hicap Permanent Well #				Common Well #		Specific Capacity 0				2. Well Type Replacement				of previous unique well #		constructed in					
										Reason for replaced or reconstructed well ? WELL FAILED											
3. Well serves 1 # of HOME				Hicap Well ? No						Construction Type Drilled											
Private, potable				Hicap Property ? No																	
Heat Exchange ___ # of drillholes				Hicap Potable ? Yes																	
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.)			
6		Surface		50								T Q S		T-TAN/BROWN Q-CAVING S-SAND		Surface		50			
						<u>No</u> Rotary - Mud Circulation				<u>No</u>											
						<u>No</u> Rotary - Air				<u>No</u>											
						<u>No</u> Rotary - Air & Foam				<u>No</u>											
						<u>No</u> Drill-Through Casing Hammer															
						<u>No</u> Reverse Rotary															
						<u>Yes</u> Cable-tool Bit 6in. dia...				<u>No</u>											
						<u>No</u> Dual Rotary				<u>No</u>											
						<u>No</u> Temp. Outer Casing ___ in. dia															
						<u>No</u> 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.)		26 ft. below ground surface				12 in. above grade							
6		STAINLESS STEEL A53B 18.97 EXCEL WELD,=				Surface		46		10. Pump Test				Developed ? Yes							
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping level 29 ft. below surface				Disinfected ? Yes							
6		12 SLOT STAINLESS STEEL TELESCOPING				46		50		Pumping at 18 GP M for 1 Hrs.				Capped ? Yes							
										Pumping Method ? Test Pump											
7. Grout or Other Sealing Material														12. Notified Owner of need to fill & seal ? No							
Method		MOUNDED												OLD WELL ABANDONED							
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement						Filled & Sealed Well(s) as needed? Yes							
GRANULAR BENTONITE				Surface		46		1 S													
														13. Constructor / Supervisory Driller				Lic #		Date Signed	
														WES				480		09-04-2018	
														Drill Rig Operator				Lic or Reg #		Date Signed	
														LM				7416		09-04-2018	

4a. Potential Contamination Sources

Is the well located in floodplain ? No

Comment:

Created On: 09-12-2018

Updated On: 05-07-2020

Review Status: APPROVED