Well Construction Report
WISCONSIN UNIQUE WELL NUMBER YW100

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

Form 3300-077A

Property Owner: YOUNG, KIM	Phone #: (920)676-2996
Mailing Address: W478 HILLSIDE DR	
City: DE PERE	State: WI — Zip Code: 54115
County: Shawano	Co. Permit #:
Notification #: 7079120701	Completed: 01-29-2018
Well Constructor (Business Name): RAYMOND YOUNG JR	Lic. #: 455
Facility ID # (Public Wells):	
Well Plan Approval #:	
Address: CHICKEN YOUNGS WELL DRILLING, GILLETT WI 54124-9587	
Approval Date (mm-dd-yyyy):	
Hicap Permanent Well #:	Common Well #:
Specific Capacity: 1.1	

1. Well Location

Village of CECIL	Fire # (if avail.): 401
Street Address or Road Name and Number: S WARRINGTON	
Subdivision Name:	Lot #: — Block #:
Latitude / Longitude in Decimal Degree (DD): 44.8065 °N -88.4549 °W	Method Code: GCD013
NW NW or Govt Lot #	Section: 20 — Township: 27 N — Range: 17 E

2. Well Type Replacement

of previous unique well # — constructed in

Reason for replaced or reconstructed well ?: SHORE WATER

Construction Type: Drilled

3. Well serves 1 # of

Private,potable

Heat Exchange____# of drillholes

Hicap Well ? No

Hicap Property ? No

Hicap Potable ? No

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
6	Surface	55

Upper Enlarged Drillhole		Lower Open Bedrock
No	Rotary - Mud Circulation	No
No	Rotary - Air	No
No	Rotary - Air & Foam	No
No	Drill-Through Casing Hammer	
No	Reverse Rotary	
No	Cable-tool Bit ____in. dia...	No
No	Dual Rotary	No
No	Temp. Outer Casing ____in. dia	
No	Removed? ____depth ft. (If NO explain on back side)	

8. Geology

Geology Codes				Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
-	-	S	-	SAND	Surface	20
-	-	C	S	SANDY CLAY	20	50
-	W	S	-	WATER SAND	50	55

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	WHEATLAND ASTMA53 WELDED	Surface	52
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
5	STAINLESS STEEL 12 SLOT	52	55

9. Static Water Level

14 ft. below ground surface

10. Pump Test

Pumping level 25 ft. below surface

Pumping at 12 GP M for 1 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
	Surface		

12. Notified Owner of need to fill & seal ? No

Filled & Sealed Well(s) as needed? No

PLUMBER

13. Constructor / Supervisory Driller	Lic #	Date Signed
RY		01-29-2018
Drill Rig Operator	Lic or Reg #	Date Signed

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Collector Sewer - San or Storm		60	Sewer - Building Sanitary		60

Comment: OWNER CALLED ON 080218 & INDICATED DRILLER DID F&S. WCR INDICATES PLUMBER DID IT.

Created On: 02-19-2018 Updated On: 11-19-2019 Review Status: