

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			1. Well Location				Fire # (if avail.)				
Mailing Address W478 HILLSIDE DR					Village of CECIL							401				
City DE PERE					State WI		Zip Code 54115					Street Address or Road Name and Number				
S WARRINGTON					Subdivision Name				Lot #		Block #					
County Shawano		Co. Permit #		Notification # 7079120701		Completed 01-29-2018		Latitude / Longitude in Decimal Degree (DD)				Method Code				
Well Constructor (Business Name) RAYMOND YOUNG JR					Lic. # 455		Facility ID # (Public Wells)				44.8065 °N -88.4549 °W		GCD013			
Address CHICKEN YOUNGS WELL DRILLING GILLET WI 54124-9587					Well Plan Approval #				NW NW		Section 20		Township 27 N		Range 17 E	
					Approval Date (mm-dd-yyyy)				or Govt Lot #							
Hicap Permanent Well #			Common Well #		Specific Capacity 1.1				2. Well Type Replacement				of previous unique well #		constructed in	
Reason for replaced or reconstructed well ?					SHORE WATER											
3. Well serves 1 # of Private, potable					Hicap Well ? No				Construction Type Drilled							
Heat Exchange ___ # of drillholes					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.)		Upper Enlarged Drillhole				Lower Open Bedrock						
6		Surface		55		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								
7. Grout or Other Sealing Material																
Method																
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement								
				Surface												
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																
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 SourcesIs 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: