Well Construction Report
WISCONSIN UNIQUE WELL NUMBER YW415

Drinking Water and Groundwater - DG/5
Department of Natural Resources, Box 7921
Madison WI 53707
Form 3300-077A

Property Owner: REEK, DUWAYNE, (HOUSE)			Phone #: (239)537-5497
Mailing Address: PO BOX 662			
City: LAND O LAKES	State: WI	Zip Code: 54540	
County: Vilas	Co. Permit #:	Notification #: 6990462201	Completed: 11-15-2017

1. Well Location
Town of LAND O LAKES
Fire # (if avail.): 5922
Street Address or Road Name and Number: RAZORBACK RD
Subdivision Name | Lot # | Block #

Well Constructor (Business Name): THOMAS F WRANIK	Lic. #: 70	Facility ID # (Public Wells)	Latitude / Longitude in Decimal Degree (DD): 46.1287 °N -89.2298 °W
Address: PO BOX 1266, EAGLE RIVER WI 54521-1266		Well Plan Approval #	Method Code: GCD013
		Approval Date (mm-dd-yyyy)	SE SW or Govt Lot #: Section: 10 Township: 42 N Range: 10 E
Hicap Permanent Well #	Common Well #	Specific Capacity: 1.1	

2. Well Type New Well
of previous unique well # constructed in
Reason for replaced or reconstructed well ?

3. Well serves 1 # of
Private,potable
Heat Exchange____# of drillholes
Hicap Well ? No
Hicap Property ? No
Hicap Potable ?
Construction Type: Drilled

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
6	Surface	38

Upper Enlarged Drillhole / Lower Open Bedrock

- Rotary - Mud Circulation .....
- Yes — Rotary - Air ..... — No
- Rotary - Air & Foam .....
- Yes — Drill-Through Casing Hammer
- Reverse Rotary
- Cable-tool Bit ____in. dia...
- Dual Rotary .....
- Temp. Outer Casing ____in. dia
- 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	14
-	A	S	-	SEMI-COARSE SAND	14	38

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	A53B WELDED M. LEAVITT 18.97 SEC. 40X20	Surface	35
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
5	TEL. JOHNSON SS #10	35	38

9. Static Water Level
14 ft. below ground surface

10. Pump Test
Pumping level 25 ft. below surface
Pumping at 12 GP M for 2 Hrs.
Pumping Method ?

11. Well Is
12 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 ?
Filled & Sealed Well(s) as needed?

13. Constructor / Supervisory Driller	Lic #	Date Signed
TW		11-15-2017
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
PN		11-15-2017

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		60	Septic or Holding, or POWTS Tank		48

Comment:

Variance ID	Variance or Exception Type	Date	Reason
	WCR Submit Time	11/15/2017	SORRY-JUST FOUND THESE WHILE GETTING PREPARED FOR SPRING.

Created On: 03-27-2018 Updated On: 06-30-2020 Review Status: