

|                                                                                              |  |                                                                      |               |                                                     |                       |                                                                                                                                                                                                                                                                                   |                                                                 |                                                                                                                                                     |  |                                                                                                                |                       |       |  |
|----------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------|---------------|-----------------------------------------------------|-----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------|-----------------------|-------|--|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b>                       |  |                                                                      |               | <b>YY413</b>                                        |                       | <b>Drinking Water and Groundwater - DG/5</b><br><b>Department of Natural Resources, Box 7921</b><br><b>Madison WI 53707</b>                                                                                                                                                       |                                                                 |                                                                                                                                                     |  | Form 3300-077A                                                                                                 |                       |       |  |
| Property Owner FUST, MIKE                                                                    |  |                                                                      |               |                                                     | Phone #               |                                                                                                                                                                                                                                                                                   | <b>1. Well Location</b><br>Fire # (if avail.)<br>970            |                                                                                                                                                     |  |                                                                                                                |                       |       |  |
| Mailing Address 970 CO E                                                                     |  |                                                                      |               |                                                     |                       |                                                                                                                                                                                                                                                                                   |                                                                 |                                                                                                                                                     |  |                                                                                                                |                       |       |  |
| City ADAMS                                                                                   |  |                                                                      | State WI      |                                                     | Zip Code 53910        |                                                                                                                                                                                                                                                                                   | Town of ADAMS<br>Street Address or Road Name and Number<br>CO E |                                                                                                                                                     |  |                                                                                                                |                       |       |  |
| County Adams                                                                                 |  | Co. Permit #                                                         |               | Notification # 7101238701                           |                       | Completed 03-18-2018                                                                                                                                                                                                                                                              |                                                                 | Subdivision Name                                                                                                                                    |  |                                                                                                                | Lot # Block #         |       |  |
| Well Constructor (Business Name)<br>BRUCE A WALKER                                           |  |                                                                      |               | Lic. # 6143                                         |                       | Facility ID # (Public Wells)                                                                                                                                                                                                                                                      |                                                                 | Latitude / Longitude in Decimal Degree (DD)<br>43.8946 °N -89.7707 °W                                                                               |  |                                                                                                                | Method Code<br>GPS008 |       |  |
| Address WISCONSIN WELL & WATER SYSTEMS LLC<br>GRAND MARSH WI 53936                           |  |                                                                      |               | Well Plan Approval #                                |                       | SE SW Section Township Range<br>or Govt Lot # 34 17 N 6 E                                                                                                                                                                                                                         |                                                                 | <b>2. Well Type</b> New Well<br>of previous unique well # constructed in<br>Reason for replaced or reconstructed well ?<br>Construction Type Jetted |  |                                                                                                                |                       |       |  |
|                                                                                              |  |                                                                      |               | Approval Date (mm-dd-yyyy)                          |                       |                                                                                                                                                                                                                                                                                   |                                                                 |                                                                                                                                                     |  |                                                                                                                |                       |       |  |
| Hicap Permanent Well #                                                                       |  |                                                                      | Common Well # |                                                     | Specific Capacity 0.6 |                                                                                                                                                                                                                                                                                   |                                                                 |                                                                                                                                                     |  |                                                                                                                |                       |       |  |
| <b>3. Well serves</b> # of<br>Private, potable<br>Heat Exchange ___ # of drillholes          |  |                                                                      |               | Hicap Well ?<br>Hicap Property ?<br>Hicap Potable ? |                       |                                                                                                                                                                                                                                                                                   |                                                                 |                                                                                                                                                     |  |                                                                                                                |                       |       |  |
| <b>4. Potential Contamination Sources - ON REVERSE SIDE</b>                                  |  |                                                                      |               |                                                     |                       |                                                                                                                                                                                                                                                                                   |                                                                 |                                                                                                                                                     |  |                                                                                                                |                       |       |  |
| <b>5. Drillhole Dimensions and Construction Method</b>                                       |  |                                                                      |               |                                                     |                       |                                                                                                                                                                                                                                                                                   |                                                                 |                                                                                                                                                     |  |                                                                                                                |                       |       |  |
| Dia. (in.)                                                                                   |  | From (ft.)                                                           |               | To (ft.)                                            |                       | Upper Enlarged Drillhole                                                                                                                                                                                                                                                          |                                                                 | Lower Open Bedrock                                                                                                                                  |  | <b>8. Geology</b><br>Geology Codes Type, Caving/Noncaving, Color, Hardness, etc... From (ft.) To (ft.)         |                       |       |  |
| 2                                                                                            |  | Surface                                                              |               | 57                                                  |                       | Rotary - Mud Circulation .....<br>Rotary - Air .....<br>Rotary - Air & Foam .....<br>Drill-Through Casing Hammer<br>Reverse Rotary<br>Cable-tool Bit ___ in. dia...<br>Dual Rotary .....<br>Temp. Outer Casing ___ in. dia<br>Removed? ___ depth ft. (If NO explain on back side) |                                                                 |                                                                                                                                                     |  | Surface 26                                                                                                     |                       |       |  |
| 1.25                                                                                         |  | 57                                                                   |               | 60                                                  |                       |                                                                                                                                                                                                                                                                                   |                                                                 | T - C -                                                                                                                                             |  | CLAY (BROWN)                                                                                                   |                       | 26 46 |  |
|                                                                                              |  |                                                                      |               |                                                     |                       |                                                                                                                                                                                                                                                                                   |                                                                 | - - C S                                                                                                                                             |  | SANDY CLAY                                                                                                     |                       | 46 55 |  |
|                                                                                              |  |                                                                      |               |                                                     |                       |                                                                                                                                                                                                                                                                                   |                                                                 | - M S -                                                                                                                                             |  | SAND (MED)                                                                                                     |                       | 55 60 |  |
|                                                                                              |  |                                                                      |               |                                                     |                       |                                                                                                                                                                                                                                                                                   |                                                                 |                                                                                                                                                     |  |                                                                                                                |                       |       |  |
| <b>6. Casing, Liner, Screen</b>                                                              |  |                                                                      |               |                                                     |                       |                                                                                                                                                                                                                                                                                   |                                                                 |                                                                                                                                                     |  |                                                                                                                |                       |       |  |
| Dia. (in.)                                                                                   |  | Material, Weight, Specification<br>Manufacturer & Method of Assembly |               |                                                     |                       | From (ft.)                                                                                                                                                                                                                                                                        |                                                                 | To (ft.)                                                                                                                                            |  | <b>9. Static Water Level</b><br>18 ft. below ground surface                                                    |                       |       |  |
| 2                                                                                            |  |                                                                      |               |                                                     |                       | Surface                                                                                                                                                                                                                                                                           |                                                                 | 57                                                                                                                                                  |  | <b>11. Well Is</b><br>14 in. above grade                                                                       |                       |       |  |
| Dia. (in.)                                                                                   |  | Screen type, material & slot size                                    |               |                                                     |                       | From (ft.)                                                                                                                                                                                                                                                                        |                                                                 | To (ft.)                                                                                                                                            |  | <b>10. Pump Test</b><br>Pumping level 26 ft. below surface<br>Pumping at 5 GP M for 2 Hrs.<br>Pumping Method ? |                       |       |  |
| 1.25                                                                                         |  | SS CS WR #10 SLOT                                                    |               |                                                     |                       | 57                                                                                                                                                                                                                                                                                |                                                                 | 60                                                                                                                                                  |  | Developed ? Yes<br>Disinfected ? Yes<br>Capped ? Yes                                                           |                       |       |  |
| <b>7. Grout or Other Sealing Material</b>                                                    |  |                                                                      |               |                                                     |                       |                                                                                                                                                                                                                                                                                   |                                                                 |                                                                                                                                                     |  |                                                                                                                |                       |       |  |
| Method                                                                                       |  |                                                                      |               |                                                     |                       |                                                                                                                                                                                                                                                                                   |                                                                 |                                                                                                                                                     |  |                                                                                                                |                       |       |  |
| Kind of Sealing Material                                                                     |  |                                                                      | From (ft.)    |                                                     | To (ft.)              |                                                                                                                                                                                                                                                                                   | # Sacks Cement                                                  |                                                                                                                                                     |  |                                                                                                                |                       |       |  |
|                                                                                              |  |                                                                      | Surface       |                                                     |                       |                                                                                                                                                                                                                                                                                   |                                                                 |                                                                                                                                                     |  |                                                                                                                |                       |       |  |
| <b>12. Notified Owner of need to fill &amp; seal ?</b><br>Filled & Sealed Well(s) as needed? |  |                                                                      |               |                                                     |                       |                                                                                                                                                                                                                                                                                   |                                                                 |                                                                                                                                                     |  |                                                                                                                |                       |       |  |
| <b>13. Constructor / Supervisory Driller</b><br>BW                                           |  |                                                                      |               |                                                     |                       |                                                                                                                                                                                                                                                                                   |                                                                 | Lic #                                                                                                                                               |  | Date Signed<br>04-18-2018                                                                                      |                       |       |  |
| Drill Rig Operator<br>HZ                                                                     |  |                                                                      |               |                                                     |                       |                                                                                                                                                                                                                                                                                   |                                                                 | Lic or Reg #                                                                                                                                        |  | Date Signed<br>04-18-2018                                                                                      |                       |       |  |

**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) |           | 52       | Septic or Holding, or POWTS Tank |           | 60       |

Comment:

Created On: 05-07-2018

Updated On: 05-07-2018

Review Status: