Well Construction Report
WISCONSIN UNIQUE WELL NUMBER ZA369

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

Form 3300-077A

Property Owner	HUBERTZ, CRAIG
Phone #	(262)215-3502
Mailing Address	2588 NORTH SHORE DR
City	DELAVAN
State	WI
Zip Code	53115
County	Walworth
Co. Permit #	
Notification #	7238292701
Completed	09-18-2018
Well Constructor (Business Name)	HINTZ, LARRY D
Lic. #	508
Facility ID # (Public Wells)	
Address	LARRY HINTZ WELL DRILLING N5273 CTY TRK M DELAVAN WI 53115-9610
Well Plan Approval #	
Approval Date (mm-dd-yyyy)	
Hicap Permanent Well #	
Common Well #	
Specific Capacity	

1. Well Location

Town of DELAVAN

Fire # (if avail.)

Street Address or Road Name and Number: 2588 N SHORE DR

Subdivision Name | Lot # | Block #

Latitude / Longitude in Decimal Degree (DD): 42.6041 °N -88.6191 °W

Method Code: GPS008

SW NW or Govt Lot # | Section: 28 | Township: 2 N | Range: 16 E

2. Well Type New Well

of previous unique well # constructed in

Reason for replaced or reconstructed well ?

Construction Type: Drilled

3. Well serves 1 # of HOME

Private,potable

Heat Exchange____# of drillholes

Hicap Well ? No

Hicap Property ? No

Hicap Potable ? Yes

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
10	Surface	4
6	4	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	
Yes	Cable-tool Bit 10in. 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.)
C	C-CLAY	Surface	4
G	G-GRAVEL/STONES	4	37
Z	Z-CLAY & GRAVEL	37	45
S	S-SAND	45	55

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	BLK STEEL P-E 18.97 A53 WHEATLAND TUBE	Surface	51
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
6	STAINLESS STEEL 15	51	55

7. Grout or Other Sealing Material

Method

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
CLAY SLURRY	Surface	4	S

9. Static Water Level

25 ft. below ground surface

10. Pump Test

Pumping level 25 ft. below surface

Pumping at 20 GP M for 10 Hrs.

Pumping Method ? Test Pump

11. Well Is

18 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

13. Constructor / Supervisory Driller	Lic #	Date Signed
LH	508	09-18-2018
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
Sewer - Collector - Sanitary		110	Building Drain - Sanitary		30
Sewer - Collector - Storm		95	Sewer - Building Sanitary		35

Comment:

Created On: 11-12-2018 Updated On: 11-14-2018 Review Status: APPROVED