Well Construction Report
WISCONSIN UNIQUE WELL NUMBER ZB133

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

Form 3300-077A

Property Owner: BEHREND, DAVE			Phone #: (715)424-1389
Mailing Address: 5911 90TH ST S			
City: WIS RAPIDS	State: WI	Zip Code: 54494	
County: Portage	Co. Permit #:	Notification #: 7454262401	Completed: 11-06-2018

1. Well Location
Town of GRANT
Fire # (if avail.):
Street Address or Road Name and Number: 5911 90TH ST S
Subdivision Name:
Lot #:
Block #:

Well Constructor (Business Name): ERON&GEE/HERMANS PLBG & HTG INC	Lic. #: 2900	Facility ID # (Public Wells):	Latitude / Longitude in Decimal Degree (DD): 44.3414 °N -89.7068 °W
		Well Plan Approval #:	Method Code: GPS008
Address: 1111 ALTON ST WISCONSIN RAPIDS WI 54495-3398		Approval Date (mm-dd-yyyy):	NW SW / or Govt Lot #: Section: 32 Township: 22 N Range: 7 E
Hicap Permanent Well #:	Common Well #:	Specific Capacity:	

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

3. Well serves 1 # of HOME
Private,potable
Heat Exchange____# of drillholes

Hicap Well ? No
Hicap Property ? No
Hicap Potable ? Yes

Construction Type: Driven Point

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
1.25	Surface	30

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	

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
1.25	GALVANIZED A53	Surface	26
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)
1.25	10 SLOT SS	26	30

7. Grout or Other Sealing Material
Method

8. Geology

9. Static Water Level
5 ft. below ground surface

10. Pump Test
Pumping level _____ ft. below surface
Pumping at _____ GP for _____ Hrs.
Pumping Method ?

11. Well Is
16 in. above grade
Developed ? Yes
Disinfected ? Yes
Capped ? Yes

12. Notified Owner of need to fill & seal ? Yes
Filled & Sealed Well(s) as needed? Yes

13. Constructor / Supervisory Driller	Lic #	Date Signed
JPE	6177	11-09-2018
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
POWTS dispersal component (soil absorption unit or mound)	>	70	Septic or Holding, or POWTS Tank	>	60

Comment: NON SENT 5/14/19 & 8/6/19 RE: < REQUIRED CASING BELOW STATIC WATER LEVEL. NON SENT ON 8/12/19 RE: STILL VIOLATION W/WELL. 8/15/19 ALL IS GOOD.

Created On: 10-04-2019 Updated On: 11-19-2019 Review Status: APPROVED