

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				ZE230		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A													
Property Owner SCHWANZ CUSTOM HOMES						Phone # (715)489-1406		1. Well Location				Fire # (if avail.)											
Mailing Address N10643 CO RD D						Town of HUTCHINS						Street Address or Road Name and Number											
City BIRNAMWOOD						State WI		Zip Code 54414				W16659 LAKE DR											
County Shawano		Co. Permit #		Notification # 7498761801		Completed 12-14-2018		Subdivision Name				Lot #		Block #									
Well Constructor (Business Name) DREWS, EDWARD J				Lic. # 327		Facility ID # (Public Wells)				Latitude / Longitude in Decimal Degree (DD) 44.971 °N -89.0897 °W				Method Code GPS008									
Address DREWS WELL DRLG R15289 RINGLE AVE RINGLE WI 54471				Well Plan Approval #				NW NE		Section 30		Township 29 N		Range 12 E									
				Approval Date (mm-dd-yyyy)				or Govt Lot #															
Hicap Permanent Well #				Common Well #		Specific Capacity 0.4				2. Well Type New Well				of previous unique well #		constructed in							
3. Well serves 1 # of HOME				Hicap Well ? No				Reason for replaced or reconstructed well ?				Construction Type Drilled											
Private, potable				Hicap Property ? No																			
Heat Exchange ___ # of drillholes				Hicap Potable ? No																			
4. Potential Contamination Sources - ON REVERSE SIDE																							
5. Drillhole Dimensions and Construction Method														8. Geology									
Dia. (in.)		From (ft.)		To (ft.)		Upper Enlarged Drillhole				Lower Open Bedrock				Geology Codes		Type, Caving/Noncaving, Color, Hardness, etc...		From (ft.)		To (ft.)			
6		Surface		81		<u>No</u> Rotary - Mud Circulation <u>No</u> <u>No</u> Rotary - Air <u>Yes</u> <u>No</u> Rotary - Air & Foam <u>No</u> <u>No</u> Drill-Through Casing Hammer <u>No</u> Reverse Rotary <u>No</u> Cable-tool Bit ___ in. dia... <u>No</u> <u>No</u> Dual Rotary <u>No</u> <u>No</u> Temp. Outer Casing ___ in. dia <u>No</u> Removed? ___ depth ft. (If NO explain on back side)								Y S M E D Q C K D Q C Q		Y-SAND & GRAVEL S-SAND M-SILTY E-GREEN D-DECOMPOSED/WEATHERED Q-GRANITE C-CLAYEY K-BLACK D-DECOMPOSED/WEATHERED Q-GRANITE C-CLAYEY Q-GRANITE		Surface 42 65 65 72 72 79 79 81		42 65 72 79 81			
6. Casing, Liner, Screen														9. Static Water Level						11. Well Is			
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		21 ft. below ground surface						18 in. above grade							
6		EXLTUBE A53 18.97 WELDED.				Surface		79		10. Pump Test						Developed ? Yes							
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping level 70 ft. below surface						Disinfected ? Yes							
										Pumping at 20 GP M for 1 Hrs.						Capped ? Yes							
										Pumping Method ? Airlift													
7. Grout or Other Sealing Material														12. Notified Owner of need to fill & seal ? No									
Method		MOUNDED												Filled & Sealed Well(s) as needed? No									
Kind of Sealing Material		From (ft.)		To (ft.)		# Sacks Cement																	
CETCO #8		Surface				1 S																	
														13. Constructor / Supervisory Driller						Lic #		Date Signed	
														EDJ						327		01-01-2019	
														Drill Rig Operator						Lic or Reg #		Date Signed	
														EDII								01-01-2019	

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

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		156	Septic or Holding, or POWTS Tank		37

Comment:

Variance ID	Variance or Exception Type	Date	Reason
	Sample Submit Time	12/14/2018	BACTI SAMPLE TO BE TAKEN WHEN PUMP SYSTEM IS INSTALLED

Created On: 02-18-2019

Updated On: 03-01-2019

Review Status: APPROVED