Well Construction Report
WISCONSIN UNIQUE WELL NUMBER ZH715

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

Property Owner: ILGEN, KAREN	Phone #: (608)579-4541
Mailing Address: 2063 LEONA ST	
City: FRIENDSHIP	State: WI — Zip Code: 53934

County	Co. Permit #	Notification #	Completed
Adams		8016684301	05-06-2020

Well Constructor (Business Name)	Lic. #	Facility ID # (Public Wells)
A & M PLUMBING & PUMP SERVICE LLC	6675	

Address: N6828 HWY 58 NORTH, NEW LISBON WI 53948

Well Plan Approval #

Approval Date (mm-dd-yyyy)

Hicap Permanent Well #	Common Well #	Specific Capacity

1. Well Location

Town of QUINCY

Fire # (if avail.): 2063

Street Address or Road Name and Number: LEONA ST

Subdivision Name	Lot #	Block #
DELLWOOD 3RD ADDITION	8-9	19

Latitude / Longitude in Decimal Degree (DD)	Method Code
43.9565 °N -89.9402 °W	OTH001

NE SE or Govt Lot #	Section	Township	Range
	7	17 N	5 E

2. Well Type Replacement

of previous unique well # constructed in

Reason for replaced or reconstructed well ?

OUT OF WATER

Construction Type: Driven Point

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.)
1.25	Surface	37

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	
No	Removed? ____depth ft. (If NO explain on back side)	

8. Geology

Geology Codes	Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
S	S-SAND	Surface	37

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
1.25	GALV/230/ASTM F480/TNC SURFACE	Surface	33
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)
1.25	SCREEN/STAINLESS/80 GAUGE	34	37

7. Grout or Other Sealing Material

Method

9. Static Water Level

14 ft. below ground surface

10. Pump Test

Pumping level 14 ft. below surface

Pumping at 10 GP M for 1 Hrs.

Pumping Method ? Test Pump

11. Well Is

24 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
AT	3835	05-19-2020
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)	>	50	Sewer - Building Sanitary	>	8
Building Drain - Sanitary	>	8	Septic or Holding, or POWTS Tank	>	25

Comment:

Created On: 07-15-2020 Updated On: 09-24-2020 Review Status: APPROVED