Well Construction Report
WISCONSIN UNIQUE WELL NUMBER ZL432

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

Property Owner: RIVERS, KAREN	Phone #: (715)441-1063
Mailing Address: PO BOX 403	
City: SIREN	State: WI — Zip Code: 54872
County: Burnett	Co. Permit #:
Notification #: 8858401201	Completed: 07-26-2022
Well Constructor (Business Name): JENNEMANS HARDWARE HANK INC	Lic. #: 704
Facility ID # (Public Wells):	
Address: PO BOX 10 SIREN WI 54872-0010	
Well Plan Approval #:	
Approval Date (mm-dd-yyyy):	
Hicap Permanent Well #:	Common Well #:
Specific Capacity:	

1. Well Location

Town of SIREN				Fire # (if avail.): 7610
Street Address or Road Name and Number: 7610 LUVERNE RD				
Subdivision Name:			Lot #:	Block #:
Latitude / Longitude in Decimal Degree (DD): 45.8109 °N -92.3747 °W				Method Code: SCR002
NW / NE or Govt Lot #:	Section: 5	Township: 38 N	Range: 16 W	

2. Well Type Replacement
of previous unique well # RT285 constructed in 2006
Reason for replaced or reconstructed well ?
PLUGGED SANDPOINT
Construction Type: Driven Point

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

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

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
2	Surface	35

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.)
2	ASTM53 WHEATLAND USA THREADED	Surface	32
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)
2	80 GA STAINLESS STEEL	32	35

7. Grout or Other Sealing Material
Method

8. Geology

9. Static Water Level
14 ft. below ground surface

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

11. Well Is
12 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
MS	6630	10-04-2022
Drill Rig Operator	Lic or Reg #	Date Signed

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

Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		72

Type	Qualifier	Distance
Sewer - Building Sanitary		22
Septic or Holding, or POWTS Tank		30

Comment: LAB REPORT ATTACHED IS AVAILABLE IN GRN

Created On: 12-01-2022 Updated On: 08-14-2023 Review Status: APPROVED