Well Construction Report
WISCONSIN UNIQUE WELL NUMBER ZM322

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

Form 3300-077A

Property Owner: OGDENBENNY & PRUCKENLAND	Phone #: (716)720-6934
Mailing Address: 146 S HANCOCK ST APT 1	
City: MADISON	State: WI — Zip Code: 53703
County: Vilas	Co. Permit #: — Notification #: — Completed: 05-26-2021
Well Constructor (Business Name): HANSER WELL & PUMP LLC	Lic. #: 8360 — Facility ID # (Public Wells):
Address: PO BOX 397 LAC DU FLAMBEAU WI 54538	Well Plan Approval #: — Approval Date (mm-dd-yyyy):
Hicap Permanent Well #:	Common Well #: — Specific Capacity:

1. Well Location

Town of CLOVERLAND	Fire # (if avail.): 2325
Street Address or Road Name and Number: BALSAM	
Subdivision Name:	Lot #: — Block #:
Latitude / Longitude in Decimal Degree (DD): 45.9538 °N -89.3873 °W	Method Code: GPS008
NE NE or Govt Lot #	Section: 17 — Township: 40 N — Range: 9 E

2. Well Type Reconstruction

of previous unique well # — constructed in

Reason for replaced or reconstructed well ?: LOW 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 ? No

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
2	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.)
2	A53 GALV. STEEL T & C	Surface	27
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)
2	SS 10 SLOT 936	27	30

7. Grout or Other Sealing Material

Method

8. Geology

9. Static Water Level

11 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 ? No

Filled & Sealed Well(s) as needed? No

13. Constructor / Supervisory Driller	Lic #	Date Signed
EH	8360	05-26-2021
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	Septic or Holding, or POWTS Tank	>	25

Comment:

Created On: 06-14-2021 Updated On: 11-16-2021 Review Status: APPROVED