

Well Construction Report For
WISCONSIN UNIQUE WELL NUMBER AB332

7 1988 State of Wisconsin
 Department of Natural Resources
 Private Water Supply - WS/2
 Box 7921
 Madison, WI 53707

Property Owner Mike Smith Telephone Number (608) 627-3203
 Mailing Address RR 2 Box 67
 City Soldiers Grove State WI Zip Code 54655
 County Crawford County Well Location Permit No. W Well Completion Date 09 26 88
 M M D D Y Y

1. Location (Please type or print using a black pen.)
 Town City Village Fire # (if available)
 of Clayton
 Grid or Street Address or Road Name and Number (if available)

Well Constructor (Business Name) Corpian Well Drilling License # 75
 Address 501 E. Oak
 City Roscoe State WI Zip Code 53805

2. Mark well location in correct 40-acre parcel of section.
 N
 W X E
 S

Subdivision Name _____ Lot # _____ Block # _____
 Gov't Lot # _____ or NE 1/4 of SW 1/4 of Section 12; T 10 N; R 3 E W

3. Well Type New Replacement Reconstruction/Rehabilitation
 of well constructed in 19 _____

4. Well serves 2 # of homes and/or _____
 (ex: barn, restaurant, church, school, industry, etc.)
 High Capacity Well? Yes No
 High Capacity Property? Yes No

Reason for new, reconstructed, replaced, or rehabilitated well?
Cut off from neighbors well
 Drilled Driven Point Jetted Other _____

5. Well Located on Highest Point of Property, Consistent with the General Layout and Surroundings? Yes No
 Well Located in Floodplain? Yes No 16 9. Downspout/Yard Hydrant _____ 17. Wastewater Sump _____
 Distance In Feet From Well To Nearest: _____ 10. Privy _____ 18. Paved Animal Barn Pen _____
 1. Landfill _____ 11. Foundation Drain to Clearwater _____ 19. Animal Yard or Shelter _____
10 2. Building Overhang _____ 12. Foundation Drain to Sewer _____ 20. Silo - Type _____
78 3. Septic or Holding Tank _____ 13. Building Drain _____ 21. Barn Gutter _____
113 4. Sewage Absorption Unit _____ Cast Iron or Plastic Other _____ 22. Manure Pipe Gravity Pressure
 _____ 5. Nonconforming Pit _____ 14. Building Sewer Gravity Pressure Cast Iron or Plastic Other _____
 _____ 6. Buried Home Heating Oil Tank _____ Cast Iron or Plastic Other _____ 23. Other Manure Storage _____
 _____ 7. Buried Petroleum Tank _____ 15. Collector Sewer _____ Other NR 112 Waste Source _____
 _____ 8. Shoreline/Swimming Pool _____ 16. Clearwater Sump _____ 24. _____

6. Drillhole Dimensions

Dia. (in.)	From (ft.)	To (ft.)
9	0 surface	168
6	168	305

Method of constructing upper enlarged drillhole. (If applicable ✓ more than one.)

1. Rotary - Mud Circulation
 2. Rotary - Air
 3. Rotary - Foam
 4. Reverse Rotary
 5. Cable-tool Bit _____ in. dia.
 6. Temp. Outer Casing 9 in. dia. Removed? Yes No
 If no, explain _____
 7. Other _____

9. Geology

Type, Caving/Noncaving, Color, Hardness, Etc.	From (ft.)	To (ft.)
<u>CB Clay & loose rock</u>	0 surface	19
<u>LC Limerock & clay</u>	19	68
<u>N Sand rock</u>	68	93
<u>SH Soft shale</u>	93	158
<u>HH hard shale</u>	158	305

7. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Mfg. & Method of Assembly	From (ft.)	To (ft.)
6	New Black Plain End	0 surface	168
	CAC ASTA 53A		
	6x21 #18.97		
Dia. (in.)	screen type and material	From	To

10. Static Water Level 229 ft. below ground surface
 11. Pump Test
 Pumping Level 272 ft. below surface
 Pumping at 7 GPM for 4 hours
 12. Well Is: Above Grade Below Grade
12 in.
 Developed? Yes No
 Disinfected? Yes No
 Capped? Yes No

8. Grout or Other Sealing Material

Method	Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
<u>Tramee</u>		0 surface	168	55
	Cement Grout			

13. Were all unused, noncomplying, or unsafe wells properly filled with sealant?
 Yes No If no, explain _____
 14. Signature of Well Constructor Michael D. Beinborn MDB 5/9/88 Date Signed
 Signature of Drill Rig Operator Michael D. Beinborn MDB 5/9/88 Date Signed

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