

**First Water Quality Test For  
WISCONSIN UNIQUE WELL NUMBER FQ 033**

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

OCT 19 1992

(Please type or print  
using a black pen.)

Property Owner Scott Sonneburg Telephone Number ( )

Mailing Address Rt 1 Box 7

City Ferryville State WI Zip Code 54628

County of Well Location Crawford Co. Well Permit No. W Well Completion Date (mm-dd-yy) 7-12-85

1. Well Location Please use decimals instead of fractions.  
 Town  City  Village Fire # (If avail.)  
of Freeman  
Grid or Street Address or Road Name and Number (If avail.)

Well Constructor (Business Name) Dons Well Drilling License # 170

Address 16189 Dutch Hill Rd

City Boscobel WI State WI Zip Code 53805

Subdivision Name NW, SE or SW NE Lot # Block #

Gov't Lot # or NE 1/4 of SE 1/4 of

Section 14 T 10 N; R 6  E  W

3. Well Type  New  
 Replacement  Reconstruction

of previous unique well # \_\_\_\_\_ constructed in 19 \_\_\_\_\_  
Reason for new, replaced or reconstructed well?

4. Well serves 1 # of homes and or home  
(Ex: barn, restaurant, church, school, industry, etc.)

High Capacity: Well?  Yes  No  
Property?  Yes  No

Drilled  Driven Point  Jetted  Other

5. Well located on highest point of property, consistent with the general layout and surroundings?  Yes  No If no, explain on back side.

Well located in floodplain?  Yes  No  
Distance in Feet From Well To Nearest:

<input type="checkbox"/> 1. Landfill	<input type="checkbox"/> 9. Downspout/Yard Hydrant	<input type="checkbox"/> 17. Wastewater Sump
<input type="checkbox"/> 2. Building Overhang	<input type="checkbox"/> 10. Privy	<input type="checkbox"/> 18. Paved Animal Barn Pen
<input checked="" type="checkbox"/> 3. Septic or Holding Tank (circle one)	<input type="checkbox"/> 11. Foundation Drain to Clearwater	<input type="checkbox"/> 19. Animal Yard or Shelter
<input checked="" type="checkbox"/> 4. Sewage Absorption Unit	<input type="checkbox"/> 12. Foundation Drain to Sewer	<input type="checkbox"/> 20. Silo - Type _____
<input type="checkbox"/> 5. Nonconforming Pit	<input type="checkbox"/> 13. Building Drain	<input type="checkbox"/> 21. Barn Gutter
<input type="checkbox"/> 6. Buried Home Heating Oil Tank	<input type="checkbox"/> Cast Iron or Plastic <input type="checkbox"/> Other	<input type="checkbox"/> 22. Manure Pipe <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure
<input type="checkbox"/> 7. Buried Petroleum Tank	<input type="checkbox"/> 14. Building Sewer <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure	<input type="checkbox"/> Cast Iron or Plastic <input type="checkbox"/> Other
<input type="checkbox"/> 8. Shoreline/Swimming Pool	<input type="checkbox"/> Cast Iron or Plastic <input type="checkbox"/> Other	<input type="checkbox"/> 23. Other Manure Storage _____
	<input type="checkbox"/> 15. Collector or Street Sewer	Other NR 112 Waste Source _____
	<input type="checkbox"/> 16. Clearwater Sump	<input type="checkbox"/> 24. _____

6. Drillhole Dimensions			Method of constructing upper enlarged drillhole only.
Dia. (in.)	From (ft.)	To (ft.)	
10	surface	66	<input type="checkbox"/> 1. Rotary - Mud Circulation <input checked="" type="checkbox"/> 2. Rotary - Air <input type="checkbox"/> 3. Rotary - Foam <input type="checkbox"/> 4. Reverse Rotary <input type="checkbox"/> 5. Cable-tool Bit _____ in. dia. <input type="checkbox"/> 6. Temp. Outer Casing _____ in. dia. Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, explain _____ <input type="checkbox"/> 7. Other _____
6	66	80	

DNR USE ONLY	9. Geology Type, Caving/Noncaving, Color, Hardness, Etc.	From To (ft.) (ft.)	
	clay	0	15
	shale	15	80

7. Casing, Liner, Screen			
Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	new black steel PE 18197	surface	66
	PSI-1200 A#120 Valley steel pipe		
Dia. (in.)	screen type, material & slot size	From	To

10. Static Water Level \_\_\_\_\_ ft. above ground surface  
\_\_\_\_\_ ft. below ground surface 55

11. Pump Test  
Pumping Level 56 ft. below surface  
Pumping at 2 GPM for 3 hours

12. Well Is:  Above Grade  Below  
Developed?  Yes  No  
Disinfected?  Yes  No  
Capped?  Yes  No

8. Grout or Other Sealing Material			
Method	Kind of Sealing Material	From (ft.)	To (ft.)
	clay	surface	8
	Cement	8	66

13. Did you permanently seal all unused, noncomplying, or unsafe wells?  
 Yes  No If no, explain \_\_\_\_\_

14. Signature of Point Driver or Licensed Supervisory Driller Donald C. Kirschbaum Date Signed 10/15/92  
Signature of Drill Rig Operator (Mandatory unless same as above) Donald D. Kirschbaum Date Signed 10/15/92

Make additional comments on reverse side about geology, additional screens, water quality, etc.  
Comments on reverse side \_\_\_\_\_ (Check , if yes)