

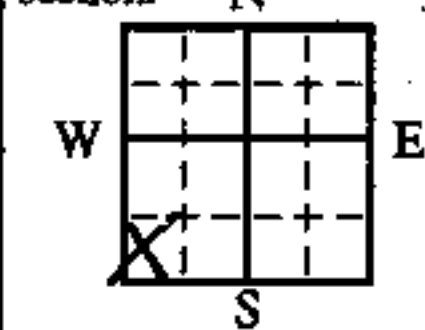
**First Water Quality Test For
WISCONSIN UNIQUE WELL NUMBER **FQ 037****

State of Wisconsin
Private Water Supply - WS/2
Department of Natural Resources
Box 7921
Madison, WI 53707
OCT 28 1992
(Please type or print using a black pen.)

Property Owner Glen Speich Telephone Number ()
Mailing Address East Brunson St
City Prairie Du Chien State WI Zip Code 53821
County of Well Location Crawford Co. Well Permit No. W Well Completion Date (mm-dd-yy) 7-20-89

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

Well Constructor (Business Name) Doss Well Drilling License # 170
Address 16189 Dutch Hill Rd
City Boscobel State WI Zip Code 53805
2. Mark well location with a dot in correct 40-acre parcel of section. N



Subdivision Name _____ Lot # _____ Block # _____
Gov't Lot # _____ or SW 1/4 of SW 1/4 of
Section 32, T 7 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?
 Drilled Driven Point Jetted Other _____

4. Well serves 1 # of homes and or home
(Ex: barn, restaurant, church, school, industry, etc.)
High Capacity: Well? Yes No
Property? Yes No

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:
1. Landfill _____ 9. Downspout/Yard Hydrant _____ 17. Wastewater Sump _____
2. Building Overhang 20' 10. Privy _____ 18. Paved Animal Barn Pen _____
3. Septic or Holding Tank (circle one) 50' 11. Foundation Drain to Clearwater _____ 19. Animal Yard or Shelter _____
4. Sewage Absorption Unit 60' 12. Foundation Drain to Sewer _____ 20. Silo - Type _____
5. Nonconforming Pit _____ 13. Building Drain _____ 21. Barn Gutter _____
6. Buried Home Heating Oil Tank _____ 14. Building Sewer Gravity Pressure Cast Iron or Plastic Other _____ 22. Manure Pipe Gravity Pressure Cast Iron or Plastic Other _____
7. Buried Petroleum Tank _____ 15. Collector or Street Sewer _____ 23. Other Manure Storage _____
8. Shoreline/Swimming Pool _____ 16. Clearwater Sump _____ 24. _____

6. Drillhole Dimensions			Method of constructing upper enlarged drillhole only.
Dia. (in.)	From (ft.)	To (ft.)	
10	surface	52	<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	52	80	

DNR USE ONLY	9. Geology Type, Caving/Noncaving, Color, Hardness, Etc.	From To (ft.) (ft.)	
G	clay	0	35
N	sand rock	35	80

7. Casing, Liner, Screen			
Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	new black steel PE 18.97 psi - 1200 p-120 valley steel pipe	surface	52

10. Static Water Level _____ ft. above ground surface
52 ft. below ground surface
11. Pump Test
Pumping Level 52 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	52

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 Date Signed
Donald C. Kirschbaum 10/26/92
Signature of Drill Rig Operator (Mandatory unless same as above) Date Signed
Donald D. Kirschbaum 10/26/92

Make additional comments on reverse side about geology, additional screens, water quality, etc.
Comments on reverse side _____ (Check , if yes) DNR WELL CONSTRUCTION/REPORT Form 3300-77A Rev. 1-92 183