Well Construction Report
WISCONSIN UNIQUE WELL NUMBER KR044

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

Form 3300-077A

Property Owner: KING, COLIN	Phone #: (715)275-5038
Mailing Address: OAK LN	
City: ELCHO	State: WI Zip Code: 54428
County: Langlade	Co. Permit #:
Notification #:	Completed: 11-10-1995
Well Constructor (Business Name): JELINEK WELL DRILLING INC	Lic. #: 6041
Facility ID # (Public Wells):	
Well Plan Approval #:	
Address: 2791 BAY DR RHINELANDER WI 54501	Approval Date (mm-dd-yyyy):
Hicap Permanent Well #:	Common Well #:
Specific Capacity: 0.9	

1. Well Location

Town of ELCHO

Fire # (if avail.):

Street Address or Road Name and Number: OAK LN

Subdivision Name	Lot #	Block #

Latitude / Longitude in Decimal Degree (DD): °N °W

Method Code:

NW	SW	Section	Township	Range
or Govt Lot #		14	34 N	11 E

2. Well Type Replacement

of previous unique well #: constructed in

Reason for replaced or reconstructed well ?: REPLACE POINT

Construction Type: Drilled

3. Well serves 1 # of

Private,potable

Heat Exchange____# of drillholes

Hicap Well ? No

Hicap Property ? No

Hicap Potable ?

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
6	Surface	38

Upper Enlarged Drillhole

Lower Open Bedrock

- Rotary - Mud Circulation .....
- Rotary - Air .....
- Rotary - Air & Foam .....
- Drill-Through Casing Hammer
- Reverse Rotary
- Cable-tool Bit ____in. dia...
- Dual Rotary .....
- Temp. Outer Casing ____in. dia
- Removed? ____depth ft. (If NO explain on back side)

8. Geology

Geology Codes	Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
Q S	CAVING BROWN SAND	Surface	38

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	SAWHILL STEEL A53B 1897 LB FT WELDED	Surface	35
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)
6	JOHNSON NO 10	35	38

9. Static Water Level

22 ft. below ground surface

10. Pump Test

Pumping level 33 ft. below surface

Pumping at 10 GP M for 1 Hrs.

Pumping Method ?

11. Well Is

18 in. above grade

Developed ? Yes

Disinfected ? Yes

Capped ? Yes

7. Grout or Other Sealing Material

Method

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? Yes

13. Constructor / Supervisory Driller	Lic #	Date Signed
DJ		11-30-1995
Drill Rig Operator	Lic or Reg #	Date Signed
KRO		11-30-1995

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

Type	Qualifier	Distance	Type	Qualifier	Distance
Building Overhang		20	Septic or Holding, or POWTS Tank	>	80
			POWTS dispersal component (soil absorption unit or mound)	>	80

Comment:

Created On: 02-12-1996 Updated On: 02-12-1996 Review Status: