7483

Prop: 14179

Return completed forms to:

Wisconsin Department of Natural Resources
Bureau of Drinking Water & Groundwater – DG/5
PO Box 7921, Madison, WI 53707-7921
dnr.wi.gov

High Capacity, School or Wastewater Treatment Plant Well Approval Request

Form 3300-295 (R 5/15)

RECEIVED-DNR JUL 27 2016 DRINKING WATER & GW

Notice: Pursuant to §§ NR 812.09(4)(a) & (b), Wis. Adm. Code, prior Department of Natural Resources (DNR) approval is required for the construction, reconstruction or operation of a high capacity well or system of high capacity wells, a school well or a wastewater treatment plan well. This form is required to be completed to request approval for installation of a well or wells on a high capacity property, to modify a well on a high capacity property, or the construction or reconstruction of a school or wastewater treatment plant well. Personally identifiable information collected will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Open Records law (s.19.31-19.39, Wis. Stats.).

Applicant Information

Name and Title		Company		
KELLY OIUM-OWNER		KELLY OIUM WELL DRILLING INC		
Street Address		**City**	**State**	**ZIP Code**
N50021 MISSELL ROAD		STRUM	WI	54770
Phone Number (include area code)	**Fax Number**	**Email Address**		
(715) 287-3525	(715) 695-3885	oiumwell51@gmail.com		

Owner Information (if different than applicant)

Name and Title		Company		
PAUL & JOANN ADAMS		ADAMS DAIRY		
Street Address		**City**	**State**	**ZIP Code**
N51634 STATE ROAD 93		ELEVA	WI	54738
Phone Number (include area code)	**Fax Number**	**Email Address**		
(715) 533-0101				

Operator Information (if different than owner)

Name and Title		Company		
KELLY OIUM, OWNER		KELLY OIUM WELL DRILLING INC		
Street Address		**City**	**State**	**ZIP Code**
N50021 MISSELL ROAD		STRUM	WI	54770
Phone Number (include area code)	**Fax Number**	**Email Address**		
(715) 287-3525	(715) 695-3885	oiumwell51@gmail.com		

Submittal Purpose

Check all that apply

- ☐ **Non-Potable Well(s)**
- ☒ **Potable Well(s) Requires Potable Attachments**
- ☐ Install one or more new wells with a capacity greater than 70 gallons per minute.
- ☒ Install one or more new wells with a capacity less than 70 gallons per minute on a high capacity property.
- ☐ Replace one or more wells with a capacity greater than 70 gallons per minute.
- ☐ Replace one or more wells with a capacity less than 70 gallons per minute on a high capacity property.
- ☐ Reconstruct one or more wells with a capacity greater than 70 gallons per minute.
- ☐ Reconstruct one or more wells with a capacity less than 70 gallons per minute on a high capacity property.
- ☐ Increase pumping rate in one or more wells to a rate greater than previously approved.
- ☐ Renew a previous approval that has expired.
- ☐ Other (please describe: School, WWTP etc.) _____

RECEIVED-DNR JUL 27 2016 DRINKING WATER & GW

Project Description

Provide a brief description of the proposed project including the number of potable wells to be installed. For non-potable wells include number of acres and expected crop rotation for agricultural irrigation wells. For potable wells serving livestock note if the facility is currently or plans to become a concentrated animal feeding operation (CAFO).

PROPOSING A 65 GPM WELL TO FEED LIVESTOCK
YES - IT IS A CAFO - SPOKE WITH ROBERT ROHLAND, DNR OF TREMPEALEAU COUNTY, AND AS LONG AS WE ARE STAYING THE DISTANCE, WHICH WE ARE OF OVER 250' FROM ANY CONTAMINATION SOURCE AND FOLLOWING THE NR812 REQUIREMENTS.

Required Enclosures

- ☒ High Capacity Well Application (Form 3300-295)
- ☒ $500 application fee (see s. 281.34 (2), Wis. Stats.)
- ☒ Well Construction Reports (if available) for existing wells
- ☒ Potable Attachment: if a proposed well is potable (Form 3300-295A)
- ☒ Aerial or Plat Map with property boundaries outlined
- ☐ Variance Request, if needed (Form 3300-210)

Return completed forms to:

State of Wisconsin, Department of Natural Resources
Bureau of Drinking Water & Groundwater – DG/5
PO Box 7921, Madison, WI 53707-7921
dnr.wi.gov

High Capacity, School or Wastewater Treatment Plant Well Approval Request

Form 3300-295 (R 5/15)

This form is used to request an approval for the construction or reconstruction of a well or wells on a high capacity property, to modify an existing well on a high capacity property, or the construction or reconstruction of a school or wastewater treatment plant well. The following information will be scanned and posted as a public record on our website. Return completed application to:

Wisconsin Department of Natural Resources
Bureau of Drinking Water & Groundwater - DG/5
PO Box 7921
Madison, WI 53707-7921

Applicant Information

Name and Title	Company
KELLY OIUM - OWNER	KELLY OIUM WELL DRILLING INC

Owner Information

Name and Title	Company
PAUL & JOANN ADAMS	ADAMS DAIRY

County	Town	Range		Section	High Capacity Well File No. (if applicable)
Trempealeau	24 N	09	○East ◉West	3	

Yes No

○ ◉ Is a proposed well within 1,200 feet of a landfill? Landfill location: (Township/Range/Section): T R S

○ ◉ Are you aware of any existing well installations on the high capacity property that are out of compliance with Chapter NR 812, Wisconsin Administrative Code? If yes, attach a description of the non-complying wells.

Existing Well Information

Enter the following information for all **existing** wells on the property and any contiguous property owned by the applicant.
Note: Applications are not complete unless they specify water use, pump capacities and GPS locations of existing wells.

Well Name and/or Number assigned by Owner	Water Use Code(s)	High Capacity Well Number	Pump Capacity (gpm)	Existing Well Coordinates Decimal Degrees Preferred (e.g. 45.1234, -89.1234) Latitude	Longitude	WUWN or WCR Image File # (if known)
91814 WELL #1	LV10	N/A	20	44.35.337	91 27.223	YM789
91815 WELL #2	LV10	N/A	20	44.35.402	91 27.410	YI886
91816 WELL #3	LV10	N/A	20	44.35.422	91 27.445	HN074

Additional Project Information

Include any additional relevant information regarding this project such as existing wells to be abandoned, proposed non-standard construction methods or pending ownership changes

44.5884, -91.4537
44.59003, -91.4568
44.5904, -91.4574

High Capacity, School or Wastewater Treatment Plant Well Approval Request

Form 3300-295 (R 5/15)

Proposed Well Information

Enter the following information for all proposed wells on the property. If more than two wells or alternate construction, submit additional sheets.

Well Location and Usage	◉ Potable ○ Non-Potable	○ Potable ○ Non-Potable
Well Name Assigned by Well Owner (North Well, etc.):	WELL #4 91817	
Town/Range/Section:	SW¼ NE¼ S 03 T 24 R 09 W	¼ ¼ S T R
Latitude :	44 35.337	
Longitude:	91 27.223	
Water Use Code (e.g. IR10):	LV10 Dairy farming	
Proposed Maximum Water Usage Per Day in Gallons:	72,000	
Proposed Maximum Water Usage Per Month in Gallons:	2,160,000	
Months of Operation (e.g. May - Sept):	ALL YEAR	
Proposed Pump Type & Capacity(gpm):	SUBMERSIBLE PUMP/65 GPM	
Discharge Type (Over Top of Casing Seal, Pitless Adapter or Unit):	PITLESS ADAPTER	
Discharge Location (Building Pressure Tank, Pond, etc.):	PUMP HOUSE	
Distance and Direction to Nearest Public Utility Well & Well Name:	SW - 2 MILES	
Distance to Other Potential Contaminant Sources:	250'+	

Well Construction		
Drilling Method(s) (Rotary, Percussion, Etc.):	Dual Rotary	
Anticipated Geological Materials and Depths that are expected during drilling:		
Material and Depth Interval:	SANDSTONE from 0 ' to 350 '	from 0 ' to '
Material and Depth Interval:	from ' to '	from ' to '
Material and Depth Interval:	from ' to '	from ' to '
Material and Depth Interval:	from ' to '	from ' to '
Drillhole Diameter and Anticipated Depth Intervals:		
Diameter and Depth Interval:	10 from 0 ' to 200 '	from 0 ' to '
Diameter and Depth Interval:	8 from 250 ' to 350 '	from ' to '
Permanent Casing or Liner Material , If Used:		
Diameter and Wall Thickness:	8 " dia .280 " thick from 0 ' to 250 '	" dia " thick from 0 ' to '
Diameter and Wall Thickness:	" dia " thick from ' to '	" dia " thick from ' to '
Casing Material and Joints (Welded, T and C, etc.):	Welded	
Weight at Depth Interval:	19.45 lbs/foot 0 ' to 250 '	lbs/foot 0 ' to '
Weight at Depth Interval:	lbs/foot ' to '	lbs/foot ' to '
Screen Material and Casing to Screen Joint (Welded, T and C, K Packer, etc.):	N/A	
Screen Slot Size in Inches and Depth Interval or N/A if none:	from ' to '	from ' to '
Annular Space Material Including Filter Pack Material, If Used:		
Material and Depth Interval:	NEAT CEMENT / 0 ' to 250 '	/ 0 ' to '

Applicant Signature

By signing this form, I certify that to the best of my knowledge, all information in the application is accurate and correct. I understand that unsigned or incomplete applications will not be approved.

Name – Print	Select One:	
KELLY OIUM	○ Owner ◉ Agent of Owner	
Signature: Kelly Oium	Company: KELLY OIUM WELL DRILLING INC	Date: 07/21/16

Return completed forms to:

State of Wisconsin, Department of Natural Resources
Bureau of Drinking Water & Groundwater – DG/5
PO Box 7921, Madison, WI 53707-7921
dnr.wi.gov

Potable High Capacity Well Attachment

Form 3300-295A (R 5/15)

Notice: This attachment is not intended to be used when seeking approval for construction or modification of wells or surface water systems regulated under ch. NR 811, Wis. Adm. Code. Any water system serving 7 or more homes, 10 or more mobile homes, 10 or more apartments, 10 or more condominiums, or 10 or more duplexes is regulated under ch. NR811, Wis. Adm. Code. See NR 811.01 Wis. Adm. Code for applicability requirements.

Property Information

Yes	No	
○	◉	Will a proposed well be connected to a plumbing system that is supplied by another water source (other wells, municipal supply, etc.)? **If yes include a schematic drawing as described in the potable attachments below.**
○	◉	Is a proposed well to be used for a transient non-community or non-transient non-community public water supply system? For water system diagram go to: dnr.wi.gov/topic/DrinkingWater/documents/publicdiagram.pdf
○	◉	Is a non-pressurized storage vessel proposed? If yes, provide drawings and specifications.
○	◉	Is a pressurized tank with a capacity greater than 1,000 gallons proposed? If yes, provide drawing(s) and specifications.
○	◉	Are you seeking a variance to construct a well that has a capacity of less than 70 gallons per minute to low capacity well construction standards?

Proposed Potable Project Description

For potable wells describe the project, include the type of well (Private, Public, School, WWTP) and note the planned storage type and volume (e.g. 500 gallon pressure tank, 500 gallon bladder tank).

8" PRIVATE WELL WITH VFD VARIABLE FREQUENCY DRIVE ON DEMAND PUMP W/20 GALLON PRESSURE.

Existing Potable Well Information

For existing potable well(s) on the property without a well construction report, provide a description of the known construction information about the well (e.g. 2" unscreened point well drilled in 1950's, 6" sandstone well unscreened).

Note: More information or an inspection of an existing well may be required before approval.

Potable Attachments

1. Enclose a sketch map showing all of the following that are planned or exist within 300 feet of each proposed potable well: proposed well location; other wells; property boundary; wetlands; potential contamination sources (septic tank and drainfield, petroleum storage tanks, sewer lines, etc.); buildings and north arrow. If there are no pertinent features to map within 300 feet of the proposed well state that on the required property map and plot the well locations.
2. If more than one well is connected to a common plumbing system, also provide a schematic drawing of the system showing method of preventing backflow. This sketch should include the well discharge (pitless, over top of casing sanitary seal); the water line from the well; pressure tanks; sampling faucets; check valves; backflow preventers; air gaps; manually operated valves; water meters; pressure switches for pumps; and any other pertinent fittings. This schematic drawing should also identify which of these components are buried or above ground. If there is more than one check valve within the casing, include in-well check valves on the schematic.

Paul Adams
Adams Dairy

<Title>

Interstate
US Hwy
State Rd
County Rd
Town Rd
City St
Railroads
Parcels
City
Town
Stream/River
Lake/Pond

All boundaries on this web image are general representations and should not be used for any legal documentation, boundary determinations, or other property related issues. Trempealeau County is not responsible for any use of this data. All data is distributed in an 'as is' format with no guarantees or warranties.

Scale 1:2400

well #(1)

Well Construction Report
WISCONSIN UNIQUE WELL NUMBER **YM789**

State of WI - Private Water Systems-DG/5
Department of Natural Resources, Box 7921
Madison, WI 53707

Form 3300-077A (R 7/10)

Property Owner: ADAMS, PAUL(ADAMS DAIRY)	Telephone Number: (715) 287-3274
Mailing Address: N51634 STATE ROAD 93	
City: ELEVA	State: WI Zip Code: 54738-
County of Well Location: TREMPEALEAU	Co. Well Permit No.: W_0643
Well Completion Date (mm-dd-yyyy): __08__03__2015	

1. Well Location
|X| Town ☐ City ☐ Village of ALBION
Fire # (If avail.): N51634
Street Address or Road Name and Number: STATE ROAD 93
Subdivision Name | Lot # | Block #
Gov't Lot # ___ or SW ___ 1/4 of NE ___ 1/4 of Section 3, T 24 N; R 9 ☐E |X|W
Latitude Deg. ___ Min. ___
Longitude Deg. ___ Min. ___

Well Constructor (Business Name): KELLY OIUM WELL DRILLING	License #: 8217
Address: PO BOX 96	Facility ID Number (Public Wells):
City: STRUM State: WI Zip Code: 54770-	Well Plan Approval #:
Hicap Permanent Well #:	Common Well #:
	Date of Approval (mm/dd/yyyy):
	Specific Capacity: gpm/ft

2. Well Type ☐ New ☐ Replacement |X| Reconstruction (see item 12 below) of previous unique well # YK501 constructed in 2014
Reason for replaced or reconstructed well? SHORT ON WATER
Lat/Long Method
|X| Drilled ☐ Driven Point ☐ Jetted ☐ Other

3. Well serves 1 # of BARN (For example: home, barn, restaurant, church, school, industry, etc.)
High Capacity: Well? ☐ Yes |X| No Property? ☐ Yes |X| No

4. Is the well located upslope or sideslope and not downslope from any contamination sources, including those on neighboring properties? |X| Yes ☐ No If no, explain on back side.
Well located within 1,200 feet of a quarry? ☐ Yes |X| No If yes, distance in feet from quarry: ___
Well located in floodplain? ☐ Yes |X| No

Distance in feet from well to nearest: (include proposed)
___ 1. Landfill
110 2. Building Overhang
80 3. Septic |X| Holding Tank ☐
___ 4. Sewage Absorption Unit
___ 5. Nonconforming Pit
___ 6. Buried Home Heating Oil Tank
___ 7. Buried Petroleum Tank
___ 8. Shoreline ☐ Swimming Pool ☐
___ 9. Downspout/Yard Hydrant
___ 10. Privy
___ 11. Foundation Drain to Clearwater
___ 12. Foundation Drain to Sewer
___ 13. Building Drain ☐ Cast Iron or Plastic ☐ Other
___ 14. Building Sewer ☐ Gravity ☐ Pressure ☐ Cast Iron or Plastic ☐ Other
___ 15. Collector Sewer: ☐ sanitary ___ units ___ in. diam. ☐ storm ☐ ≤ 6" ☐ > 6"
___ 16. Clearwater Sump
___ 17. Wastewater Sump
___ 18. Paved Animal Barn Pen
___ 19. Animal Yard or Shelter
___ 20. Silo
___ 21. Barn Gutter
___ 22. Manure Pipe ☐ Gravity ☐ Pressure ☐ Cast Iron or Plastic ☐ Other
___ 23. Other Manure Storage ___
___ 24. Ditch
___ 25. Other NR 812 Waste Source ___

5. Drillhole Dimensions and Construction Method

Dia.(in.)	From (ft.)	To (ft.)	Upper Enlarged Drillhole	Lower Open Bedrock
6	surface	260	☐---1. Rotary - Mud Circulation----------	☐
			☐---2. Rotary - Air----------	☐
			☐---3. Rotary - Air and Foam----------	☐
			☐---4. Drill-Through Casing Hammer	
6	260	325	☐---5. Reverse Rotary	
			|X|---6. Cable-tool Bit ___ in. dia. 8 --------	☐
			☐---7. Temp. Outer Casing ___ in. dia. Removed? ___ depth ft. ☐ Yes ☐ No - If no, explain on back side.	
			☐---8. Dual Rotary----------	☐

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	IPSCO ASTM A53B.280 P/E S	surface	30
	CASING		
Dia. (in.)	Screen type, material & slot size	From	To

7. Grout or Other Sealing Material
Method GROUT PUMP TREMIE PIPE

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
NEAT CEMENT GROUT	surface	30	21
(Gravel pack if applicable)			

Geology Codes	8. Geology Type, Caving/Noncaving, Color, Hardness, etc.	From (ft.)	To (ft.)
G - N -	Gray, Sandstone	surface	260
		260	325

9. Static Water Level
___ ft. above ground surface
180 ft. below ground surface

10. Pump Test
Pumping level 280 ft. below surface
Pumping at 25 GPM for 2 Hrs.

11. Well Is:
|X| Above Grade 20 in. ☐ Below
Developed? |X| Yes ☐ No
Disinfected? |X| Yes ☐ No
Capped? |X| Yes ☐ No

12. Did you permanently abandon and fill all unused, noncomplying or unsafe wells on this property?
☐ Yes ☐ No If no, explain on reverse.

13. Signature of Well Constructor or Supervisory Driller: KO — Date Signed: 08/05/2015
Print Name of Drill Rig Operator (Mandatory unless same as above): BG — Date: 08/05/2015

Make additional comments on reverse side about geology, additional screens, water quality, etc.
Comments on reverse side _X_ (CHECK √, IF YES) Variance Issued ☐ Yes ☐ No
Notification # 51939647

DNR

Well #3

WISCONSIN UNIQUE WELL NUMBER **YI886**

Source: ELECTRONICALLY

State of Wi-Private Water Systems-DG/2 [illegible]-77A
Department Of Natural Resources, Box 7921 (Rev 02/02)bw
Madison, WI 53707

Depth 230 FT

Property Owner: ADAMS, PAUL (ADAMS DAIRY)	Telephone Number: 715-287-3274	
Mailing Address: N 51634 STATE ROAD 93		
City: ELEVA	State: WI	Zip Code: 54738
County of Well Location: 62 TREMPEALEAU WC	Co Well Permit No W 0279	Well Completion Date: May 16, 2013

1. Well Location

T=Town C=City V=Village: T of ALBION

Fire#: N5163

Street Address or Road Name and Number: STATE ROAD 93

Subdivision Name | Lot# | Block #

Gov't Lot or SE 1/4 of NW 1/4 of

Section 3 T 24 N R 9 W

Well Constructor: KELLY OIUM	License #: 6244	Facility ID (Public)
Address: OIUM WELL DRILLING & PUMP SERVICE		Public Well Plan Approval#
City: STRUM	State: WI Zip Code: 54770	Date Of Approval
Hicap Permanent Well #	Common Well #	Specific Capacity: .5 gpm/ft

2. Well Type 3 (See item 12 below)

1=New 2=Replacement 3=Reconstruction

of previous unique well # LE932 constructed in 2001

Reason for replaced or reconstructed Well?

NEEDED MORE GPM

1 1=Drilled 2=Driven Point 3=Jetted 4=Other

3. Well Serves P # of homes and or BARN (eg: barn, restaurant, church, school, industry, etc.)

M=Munic O=OTM N=NonCom P=Private Z=Other X=NonPot A=Anode L=Loop H=Drillhole

High Capacity: Well? N Property? N

4. Is the well located upslope or sideslope and not downslope from any contamination sources, including those on neighboring properties? Y

Well located in floodplain? N

Distance in feet from well to nearest: (including proposed)

1. Landfill
100 2. Building Overhang
3. 1=Septic 2= Holding Tank
4. Sewage Absorption Unit
5. Nonconforming Pit
6. Buried Home Heating Oil Tank
7. Buried Petroleum Tank
8. 1=Shoreline 2= Swimming Pool
9. Downspout/ Yard Hydrant
10. Privy
11. Foundation Drain to Clearwater
12. Foundation Drain to Sewer
13. Building Drain 1=Cast Iron or Plastic 2=Other
14. Building Sewer 1=Gravity 2=Pressure 1=Cast Iron or Plastic 2=Other
15. Collector Sewer: ___ units ___ in . diam.
16. Clearwater Sump
17. Wastewater Sump
100 18. Paved Animal Barn Pen
100 19. Animal Yard or Shelter
20. Silo
100 21. Barn Gutter
22. Manure Pipe 1=Gravity 2=Pressure 1=Cast iron or Plastic 2=Other
23. Other manure Storage
24. Ditch
25. Other NR 812 Waste Source

5. Drillhole Dimensions and Construction Method

Dia.(in.)	From (ft)	To (ft)
10.0	surface	30
6.0	30	190
6.0	190	230

Upper Enlarged Drillhole / Lower Open Bedrock

-- 1. Rotary - Mud Circulation
-- 2. Rotary - Air
-- 3. Rotary - Air and Foam
-- 4. Drill-Through Casing Hammer
-- 5. Reverse Rotary
X -- 6. Cable-tool Bit 10 n. dia
-- 7. Temp. Outer Casing _ Removed ? in. dia. _____ depth ft.

Other

6. Casing Liner Screen Material, Weight, Specification Manufacturer & Method of Assembly

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6.0	6.620 X A53B.280 EW TC	surface	34

Dia.(in.)	Screen type, material & slot size	From	To

7. Grout or Other Sealing Material

Method: GROUOT PUMP TREMIE PIPE

Kind of Sealing Material: NEAT CEMENT GROUT

From (ft.)	To (ft.)	# Sacks Cement
surface	30.0	16 S

Geology Codes	8. Geology Type, Caving/Noncaving, Color, Hardness, etc	From (ft.)	To (ft.)
__I_	Top Soil	0	1
T_CS	Light Brown, Clay, Sandy	1	15
TSN_	Light Brown, Soft , Sandstone	15	33
TSN_	Firm, Brown Sandstone	33	45
G_NH	Light Gray, Sandstone, Shaley	45	190
T_N_	Brown, Sandstone	190	230

9. Static Water Level

80.0 feet B ground surface A=Above B=Below

10. Pump Test

Pumping level 130.0 ft. below surface

Pumping at 25.0 GP M 3.0 Hrs

11. Well Is: 24 in. A Grade A=Above B=Below

Developed? Y

Disinfected? Y

Capped? Y

12. Did you notify the owner of the need to permanently abandon and fill all unused wells on this property?

If no, explain

13. Initials of Well Constructor or Supervisory Driller: KO Date Signed: 5/27/14

Initials of Drill Rig Operator (Mandatory unless same as above): DT Date Signed: 5/27/14

Additonal Comments?

Owner Sent Label? Y

Variance Issued? N

More Geology?

47809805

Batch 888888888

WISCONSIN UNIQUE WELL NUMBER **HN074**

Source: WELL CONSTRUCTION

State of Wi-Private Water Systems-DG/2
Department Of Natural Resources, Box 7921
Madison, WI 53707

Form 3300-77A (Rev 02/02)bw

Well Depth 162 (3) FT

Property Owner: ADAMS DAIRY, PAUL		Telephone Number: 715-287-3272	
Mailing Address: RT 1 BOX 273			
City: ELEVA	State: WI	Zip Code: 54738	
County of Well Location: 62 TREMPEALEAU	Co Well Permit No: W WC	Well Completion Date: July 6, 1994	

1. Well Location

T=Town C=City V=Village: T of ALBION

Fire#:

Street Address or Road Name and Number: ST HWY 93

Subdivision Name: | Lot#: | Block #:

Gov't Lot: | or SE 1/4 of NW 1/4 of

Section 3 T 24 N R 9 W

Well Constructor: DONALD S FEDIE	License #: 127	Facility ID (Public):	
Address: W536 U S HWY 10		Public Well Plan Approval#:	
City: MONDOVI	State: WI	Zip Code: 54755	Date Of Approval:
Hicap Permanent Well #:	Common Well #:		Specific Capacity: .8 gpm/ft

2. Well Type 1 (See item 12 below)

1=New 2=Replacement 3=Reconstruction

of previous unique well # _____ constructed in 0

Reason for replaced or reconstructed Well?

NEW CONSTRUCTION

1 1=Drilled 2=Driven Point 3=Jetted 4=Other

3. Well Serves # of homes and or BARN: P (eg: barn, restaurant, church, school, industry, etc.)

M=Munic O=OTM N=NonCom P=Private Z=Other X=NonPot A=Anode L=Loop H=Drillhole

High Capacity: Well? N Property? N

4. Is the well located upslope or sideslope and not downslope from any contamination sources, including those on neighboring properties? Y

Well located in floodplain? N

Distance in feet from well to nearest: (including proposed)

	1. Landfill		9. Downspout/ Yard Hydrant		17. Wastewater Sump
65	2. Building Overhang		10. Privy	70	18. Paved Animal Barn Pen
80	3. 1=Septic 2= Holding Tank		11. Foundation Drain to Clearwater	> 100	19. Animal Yard or Shelter
> 100	4. Sewage Absorption Unit		12. Foundation Drain to Sewer	> 200	20. Silo SEALED CONCRETE
	5. Nonconforming Pit	> 50	13. Building Drain 1 1=Cast Iron or Plastic 2=Other	> 100	21. Barn Gutter
	6. Buried Home Heating Oil Tank		14. Building Sewer 1 1=Gravity 2=Pressure 1 1=Cast Iron or Plastic 2=Other	200	22. Manure Pipe 1 1=Gravity 2=Pressure 1 1=Cast iron or Plastic 2=Other
	7. Buried Petroleum Tank		15. Collector Sewer: ___ units ___ in . diam.	> 300	23. Other manure Storage
	8. 1=Shoreline 2= Swimming Pool		16. Clearwater Sump		24. Ditch
					25. Other NR 812 Waste Source

5. Drillhole Dimensions and Construction Method

Dia.(in.)	From (ft)	To (ft)
10.0	surface	40
6.0	40	162

Upper Enlarged Drillhole / Lower Open Bedrock

-- 1. Rotary - Mud Circulation
-- 2. Rotary - Air
-- 3. Rotary - Air and Foam
-- 4. Drill-Through Casing Hammer
-- 5. Reverse Rotary
X -- 6. Cable-tool Bit 10 n. dia
-- 7. Temp. Outer Casing _ in. dia. _____ depth ft. Removed ?

Other

Geology Codes	8. Geology Type, Caving/Noncaving, Color, Hardness, etc	From (ft.)	To (ft.)
__I_	TOPSOIL	0	1
_VC_	BROWN NONCAVING CLAY	1	16
_VH_	SOFT NONCAVING GREEN SHALE	16	32
E_H_	SEMIFIRM GREEN SHALE	32	94
G_H_	SEMIFIRM GRAY SHALE	94	110
_HN_	FIRM GRAY SANDSTONE	110	162

6. Casing Liner Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6.0	T/C PIPE ASTM A53 GR B 19.45 LBS. FT SAWHILLTUBULAR A.F. SEIDEMAN CO.	surface	111

Dia.(in.)	Screen type, material & slot size	From	To

9. Static Water Level

75.0 feet B ground surface (A=Above B=Below)

10. Pump Test

Pumping level 95.0 ft. below surface

Pumping at 15.0 GP M 8.5 Hrs

11. Well Is: 12 in. A Grade (A=Above B=Below)

Developed? Y

Disinfected? Y

Capped? Y

7. Grout or Other Sealing Material

Method TREMIE PIPE

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
DRILL SLURRY	surface	7.0	
NEAT CEMENT GROUT	7.0	40.0	18 S

12. Did you notify the owner of the need to permanently abandon and fill all unused wells on this property?

If no, explain

13. Initials of Well Constructor or Supervisory Driller: DSF Date Signed: 7/10/94

Initials of Drill Rig Operator (Mandatory unless same as above): DSF Date Signed: 7/10/94

Additonal Comments? Variance Issued?

Owner Sent Label? Y More Geology?

Batch 288