



January 26, 2022

Mr. BJ LeRoy  
Wisconsin Department of Natural Resources  
Milwaukee Service Center  
1027 W. St. Paul Ave  
Milwaukee, WI 53233

**Re: MW-112, MW-114 and MW-115 Groundwater Monitoring Well Abandonment Documentation  
Waste Management Boundary Road Landfill  
WDNR License No. 0011**

Dear Mr. LeRoy:

On behalf of Waste Management, Cornerstone Environmental Group, LLC, a Tetra Tech Company (Tetra Tech) is submitting documentation to the Wisconsin Department of Natural Resources (WDNR) for the abandonment of three groundwater monitoring wells at the Boundary Road Landfill during August of 2021. The monitoring wells were abandoned as requested by the department.

The abandoned groundwater monitoring wells were constructed with 2-inch PVC and were installed in unconsolidated soils. Wells MW-112 and MW-115 were abandoned August 4, 2021 and Well MW-114 was abandoned on August 18, 2021 by Soils and Engineering Services, Inc. of Madison, Wisconsin.

The abandonment work was performed in accordance with the Wisconsin Administrative Code NR 141 and NR 507, under the direction of a Wisconsin Professional Geologist. A Well Filling & Sealing Report (WDNR Form 3300-005) has been prepared for each well and the previously completed well construction logs which show casing and boring depth for each well, are provided in Attachment A. Additionally, an updated Well Information Form (WDNR Form 4400-089) for the three abandoned wells is included in Attachment B.

Upon your review of this letter, please contact me at 608-346-1677 with any questions.

Sincerely,

**CORNERSTONE ENVIRONMENTAL GROUP, LLC – A TETRA TECH COMPANY**

A handwritten signature in blue ink, appearing to read 'L. Specketer'.

Luke Specketer, P.G.  
Geologist

Mr. BJ LeRoy  
January 26, 2022

Enclosures: Attachment A - WDNR Abandonment Forms and Well Construction Logs  
Attachment B - WDNR Well Information Form

cc: BJ LeRoy – WDNR – electronic copy and hard copy  
David Buser – WDNR – electronic copy  
Ryan Baeten – Waste Management – electronic copy  
Brett Coogan - Waste Management – electronic copy  
Greg Konsionowski - Waste Management – electronic copy  
Lee Daigle – Tetra Tech – electronic copy

**CERTIFICATION**

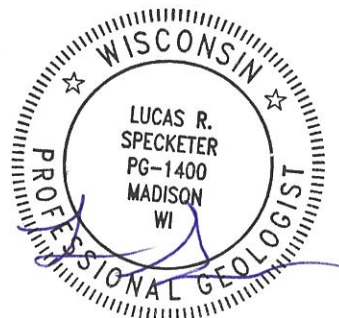
I, Lucas R Specketer, hereby certify that I am a licensed professional geologist in the State of Wisconsin in accordance with the requirements of ch. GHSS 2, Wis. Adm. Code; that the preparation of this document has not involved any unprofessional conduct as detailed in ch. GHSS 5, Wis. Adm. Code; and that, to the best of my knowledge, all information contained in this document is correct and the document was prepared in compliance with all applicable requirements in chs. NR 500 to 538, Wis. Adm. Code.

Lucas R. Specketer

Signature

Geologist

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**TETRA TECH**

**Attachment A**

WDNR Abandonment Forms and Well Construction Logs

**Notice:** Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

**Verification Only of Fill and Seal**

**Route to DNR Bureau:**

Drinking Water       Watershed/Wastewater       Remediation/Redevelopment  
 Waste Management       Other: \_\_\_\_\_

**1. Well Location Information**      **2. Facility / Owner Information**

County <b>Waukesha</b>		WI Unique Well # of Removed Well <b>NH079</b>	Hicap # <b>N/A</b>
Latitude / Longitude (see instructions) 43.182594 N 88.862349 W		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input checked="" type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001
¼ / ¼ SE or Gov't Lot #	¼ NE	Section <b>1</b>	Township <b>8 N</b>
Well Street Address <b>W124 Boundary Road</b>		Range <b>21</b>	Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well City, Village or Town <b>Menomonee Falls</b>		Well ZIP Code <b>53051</b>	
Subdivision Name		Lot #	

Facility Name <b>Boundary Road Landfill</b>		
Facility ID (FID or PWS) <b>26862940</b>		
License/Permit/Monitoring # <b>WDNR #0011</b>		
Original Well Owner <b>Waste Management</b>		
Present Well Owner <b>Waste Management</b>		
Mailing Address of Present Owner <b>W124 Boundary Road</b>		
City of Present Owner <b>Menomonee Falls</b>	State <b>WI</b>	ZIP Code <b>53051</b>

Reason for Removal from Service <b>No longer monitored</b>	WI Unique Well # of Replacement Well <b>NA</b>
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**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>10/11/1991</b>
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.
<input type="checkbox"/> Borehole / Drillhole	
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>20</b>	Casing Diameter (in.) <b>2</b>
Lower Drillhole Diameter (in.) <b>8.5</b>	Casing Depth (ft.) <b>9.8</b>
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)? <b>5.5</b>	Depth to Water (feet) <b>5.8 TOC</b>

**4. Pump, Liner, Screen, Casing & Sealing Material**

Pump and piping removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Screen removed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Did sealing material rise to surface?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If yes, was hole retopped?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Required Method of Placing Sealing Material	
<input type="checkbox"/> Conductor Pipe-Gravity	<input type="checkbox"/> Conductor Pipe-Pumped
<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips)	<input type="checkbox"/> Other (Explain): _____
Sealing Materials	
<input type="checkbox"/> Neat Cement Grout	<input checked="" type="checkbox"/> Concrete
<input type="checkbox"/> Sand-Cement (Concrete) Grout	<input type="checkbox"/> Bentonite Chips
For Monitoring Wells and Monitoring Well Boreholes Only:	
<input checked="" type="checkbox"/> Bentonite Chips	<input type="checkbox"/> Bentonite - Cement Grout
<input type="checkbox"/> Granular Bentonite	<input type="checkbox"/> Bentonite - Sand Slurry

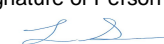
**5. Material Used to Fill Well / Drillhole**

<b>3/8" Bentonite Chips</b>	From (ft.) <b>Surface</b>	To (ft.) <b>20</b>	No. Yards, Sacks Sealant or Volume (circle one) <b>40 pounds</b>	Mix Ratio or Mud Weight
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**6. Comments**

MW-112, total well depth was originally 20.0ft below ground surface. First the PVC well casing was filled with bentonite chips then the well casing, screen and protective steels pipe were removed with the drill rig. The empty hole was then filled with bentonite

**7. Supervision of Work**      **DNR Use Only**

Name of Person or Firm Doing Filling & Sealing <b>Tetra Tech</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>08/04/2021</b>	Date Received	Noted By
Street or Route <b>8413 Excelsior Drive, Suite 160</b>		Telephone Number <b>( 630 ) 410-7725</b>	Comments	
City <b>Madison</b>	State <b>WI</b>	ZIP Code <b>53717</b>	Signature of Person Doing Work 	Date Signed <b>8/20/2021</b>

Facility/Project Name <b>Boundary Road Landfill</b>	Local Grid Location of Well ft. <input type="checkbox"/> N <input type="checkbox"/> S _____ ft. <input type="checkbox"/> E <input type="checkbox"/> W _____	Well Name <b>MW112</b>
Facility License, Permit or Monitoring Number	Grid Origin Location Lat _____ Long _____ or St. Plane <b>437012</b> ft. N, <b>2516789</b> ft. E.	Wis. Unique Well Number _____ DNR Well Number _____
Type of Well Water Table Observation Well <input checked="" type="checkbox"/> 11 Piezometer <input type="checkbox"/> 12	Section Location of Waste/Source --- 1/4 of SE 1/4 of Sec. <b>1</b> , T. <b>8</b> N, R. <b>21</b> E. W.	Date Well Installed <b>10 / 11 / 91</b> m m / d d / y y
Distance Well Is From Waste/Source Boundary <b>350</b> ft.	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input checked="" type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	Well Installed By: (Person's Name and Firm) <b>G. Prior-Warzyn Inc.</b>
Well A Point of Enforcement Std. Application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

A. Protective pipe, top elevation **757 22** ft. MSL

J. Well casing, top elevation **757 07** ft. MSL

C. Land surface elevation **755 0** ft. MSL

D. Surface seal, bottom **749 5** ft. MSL or **5 5** ft.

12. USCS classification of soil near screen:  
GP  GM  GC  GW  SW  SP   
SM  SC  ML  MH  CL  CH   
Bedrock

13. Sieve analysis attached?  Yes  No

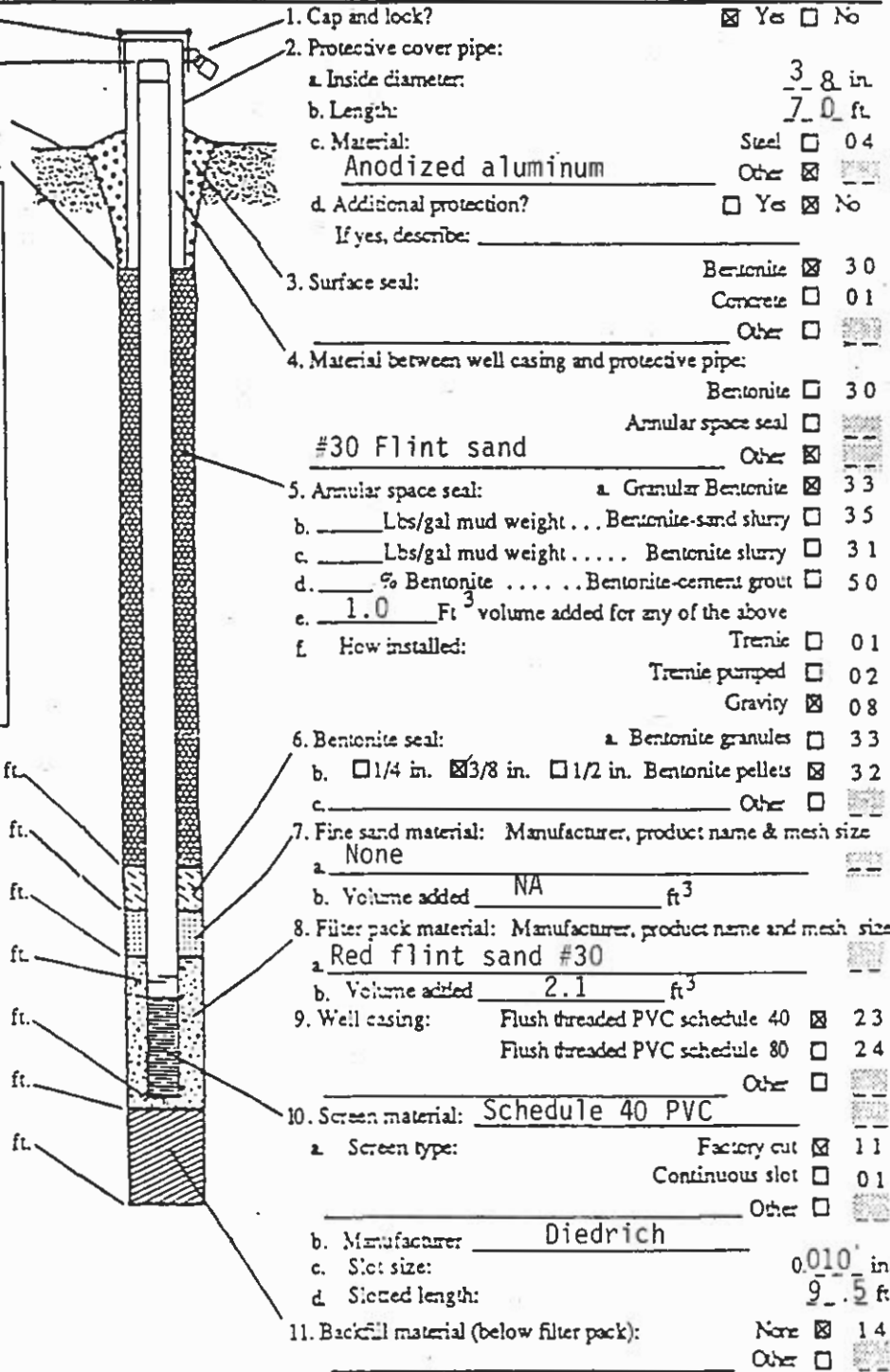
14. Drilling method used: Rotary  50  
Hollow Stem Auger  41  
Other

15. Drilling fluid used: Water  02 Air  01  
Drilling Mud  03 None  99

Drilling additives used?  Yes  No

Describe \_\_\_\_\_

17. Source of water (attach analysis):



E. Bentonite seal, top **749 5** ft. MSL or **5 5** ft.

F. Fine sand, top \_\_\_\_\_ ft. MSL or \_\_\_\_\_ ft.

G. Filter pack, top **747 9** ft. MSL or **7 1** ft.

H. Screen joint, top **745 2** ft. MSL or **9 8** ft.

I. Well bottom **735 0** ft. MSL or **20 0** ft.

J. Filter pack, bottom **735 0** ft. MSL or **20 0** ft.

K. Borehole, bottom **735 0** ft. MSL or **20 0** ft.

L. Borehole, diameter **8 5** in.

M. O.D. well casing **2 40** in.

N. I.D. well casing **2 00** in.

I hereby certify that the information on this form is true and correct to the best of my knowledge.

Signature R. H. Raney Firm Warzyn Inc.



**Notice:** Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

**Verification Only of Fill and Seal**

**Route to DNR Bureau:**

Drinking Water       Watershed/Wastewater       Remediation/Redevelopment  
 Waste Management       Other: \_\_\_\_\_

**1. Well Location Information**      **2. Facility / Owner Information**

County <b>Waukesha</b>	WI Unique Well # of Removed Well <b>NH097</b>	Hicap # <b>N/A</b>
Latitude / Longitude (see instructions) <b>43.185013</b> N <b>88.063038</b> W	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input checked="" type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001
¼ / ¼ SE      ¼ NE or Gov't Lot #	Section <b>1</b>	Township <b>8 N</b>
Well Street Address <b>W124 Boundary Road</b>	Range <b>21</b>	Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well City, Village or Town <b>Menomonee Falls</b>	Well ZIP Code <b>53051</b>	
Subdivision Name	Lot #	

Facility Name <b>Boundary Road Landfill</b>
Facility ID (FID or PWS) <b>26862940</b>
License/Permit/Monitoring # <b>WDNR #0011</b>
Original Well Owner <b>Waste Management</b>
Present Well Owner <b>Waste Management</b>
Mailing Address of Present Owner <b>W124 Boundary Road</b>
City of Present Owner <b>Menomonee Falls</b>
State <b>WI</b>
ZIP Code <b>53051</b>

Reason for Removal from Service <b>No longer monitored</b>	WI Unique Well # of Replacement Well <b>NA</b>
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**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>10/07/1992</b>
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.
<input type="checkbox"/> Borehole / Drillhole	
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>17.3</b>	Casing Diameter (in.) <b>2</b>
Lower Drillhole Diameter (in.) <b>8.5</b>	Casing Depth (ft.) <b>8.0</b>
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)? <b>5.0</b>	Depth to Water (feet) <b>6.3 - TOC</b>

**4. Pump, Liner, Screen, Casing & Sealing Material**

Pump and piping removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Screen removed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Did sealing material rise to surface?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If yes, was hole retopped?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Required Method of Placing Sealing Material	<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____
Sealing Materials	<input type="checkbox"/> Neat Cement Grout <input checked="" type="checkbox"/> Concrete <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite Chips
<i>For Monitoring Wells and Monitoring Well Boreholes Only:</i>	
<input checked="" type="checkbox"/> Bentonite Chips	<input type="checkbox"/> Bentonite - Cement Grout
<input type="checkbox"/> Granular Bentonite	<input type="checkbox"/> Bentonite - Sand Slurry


**5. Material Used to Fill Well / Drillhole**

	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
<b>3/8" Bentonite Chips</b>	Surface	17.3	45 pounds	

**6. Comments**

MW-114, total well depth was originally 18.1ft below ground surface. First the PVC well casing was filled with bentonite chips then the well casing, screen and protective steels pipe were removed with the drill rig. The empty hole was then filled with bentonite chips.

**7. Supervision of Work**      **DNR Use Only**

Name of Person or Firm Doing Filling & Sealing <b>Tetra Tech</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>08/18/2021</b>	Date Received	Noted By
Street or Route <b>8413 Excelsior Drive, Suite 160</b>	City <b>Madison</b>	State <b>WI</b>	Telephone Number <b>( 630 ) 410-7725</b>	Signature of Person Doing Work 
ZIP Code <b>53717</b>	Comments		Date Signed <b>8/20/2021</b>	

Facility/Project Name <b>Boundary Road Landfill</b>	Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> E. ft. <input type="checkbox"/> S. <input type="checkbox"/> W.	Well Name <b>MW114</b>
Facility License, Permit or Monitoring Number	Grid Origin Location Lat. _____ Long. _____ or	Wis. Unique Well Number _____ DNR Well Number _____
Type of Well <input checked="" type="checkbox"/> Water Table Observation Well <input type="checkbox"/> 11 <input type="checkbox"/> Piezometer <input type="checkbox"/> 12	Section Location of Waste/Source <input checked="" type="checkbox"/> E. St. Plane <b>437950</b> ft. N, <b>2516624</b> ft. E.	Date Well Installed <b>10-07-92</b>
Distance Well Is From Waste/Source Boundary <b>420</b> ft.	Location of Well Relative to Waste/Source <b>- 1/4 of SE 1/4 of Sec. 1, T.8N, R20</b> <input type="checkbox"/> W.	Well Installed By: (Person's Name and Firm) <b>T. Karwoski - Warzyn Inc.</b>
Is Well A Point of Enforcement Std. Application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input checked="" type="checkbox"/> Not Known	

A. Protective pipe, top elevation <b>760.65</b> ft. MSL	1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation <b>760.47</b> ft. MSL	2. Protective cover pipe: a. Inside diameter: <b>3.8</b> in. b. Length: <b>6.0</b> ft. c. Material: <b>Steel</b> <input type="checkbox"/> 04 <b>Anodized Aluminum</b> <input checked="" type="checkbox"/> Other d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, describe: _____
C. Land surface elevation <b>758.3</b> ft. MSL	3. Surface seal: <b>Bentonite</b> <input checked="" type="checkbox"/> 30 <b>Concrete</b> <input type="checkbox"/> 01 Other <input type="checkbox"/>
D. Surface Seal, bottom <b>753.3</b> ft. MSL or <b>5.0</b> ft.	4. Material between well casing and protective pipe: <b>Bentonite</b> <input checked="" type="checkbox"/> 30 <b>Annular space seal</b> <input type="checkbox"/> <b>#30 Flint Sand Above Ground Surface</b> <input checked="" type="checkbox"/> Other
12. USCS classification of soil near screen: GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input checked="" type="checkbox"/> SM <input checked="" type="checkbox"/> SC <input type="checkbox"/> ML <input checked="" type="checkbox"/> MH <input type="checkbox"/> CL <input checked="" type="checkbox"/> CH <input type="checkbox"/> Bedrock <input type="checkbox"/>	5. Annular space seal: a. Granular Bentonite <input checked="" type="checkbox"/> 33 b. _____ Lbs/gal mud weight... Bentonite-sand slurry <input type="checkbox"/> 35 c. _____ Lbs/gal mud weight... Bentonite slurry <input type="checkbox"/> 31 d. _____ % Bentonite... Bentonite-cement grout <input type="checkbox"/> 50 e. <b>1.4</b> cu ft volume added for any of the above f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input checked="" type="checkbox"/> 08
13. Sieve analysis attached? <input type="checkbox"/> Yes <input type="checkbox"/> No	6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33 b. <input type="checkbox"/> 1/4 in. <input type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite pellets <input type="checkbox"/> 32 c. 3/8" Bentonite Chips <input type="checkbox"/> Other <input checked="" type="checkbox"/>
14. Drilling method used: Rotary <input type="checkbox"/> 50 Hollow Stem Auger <input checked="" type="checkbox"/> 41 Other <input type="checkbox"/>	7. Fine sand material: Manufacturer, product name & mesh size a. <b>Badger Mining corporation Fine Mesh Silica</b> b. Volume a <b>0.25</b> cu ft
15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input type="checkbox"/> 01 Drilling Mud <input type="checkbox"/> 03 None <input checked="" type="checkbox"/> 99	8. Filter pack material: Manufacturer, product name & mesh size a. <b>American Mat's Red Flint #30</b> b. Volume added <b>1.75</b> cu ft
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Describe _____	9. Well casing: <b>Flush threaded PVC schedule 40</b> <input checked="" type="checkbox"/> 23 <b>Flush threaded PVC schedule 80</b> <input type="checkbox"/> 24 Other <input type="checkbox"/>
17. Source of water (attach analysis): City of Milwaukee	10. Screen material: <b>Sch 40 PVC</b> a. Screen type: <b>Factory cut</b> <input checked="" type="checkbox"/> 11 <b>Continuous slot</b> <input type="checkbox"/> 01 Other <input type="checkbox"/> b. Manufacturer <b>Diedrich</b> c. Slot size: <b>0.01</b> in. d. Slotted length: <b>10.1</b> ft.
E. Bentonite seal, top <b>758.3</b> ft. MSL or <b>0.0</b> ft.	11. Backfill material (below filter pack): <b>Caved Soil</b> <input checked="" type="checkbox"/> 14 Other <input type="checkbox"/>
F. Fine sand, top <b>753.3</b> ft. MSL or <b>5.0</b> ft.	
G. Filter pack, top <b>752.3</b> ft. MSL or <b>6.0</b> ft.	
H. Screen joint, top <b>750.3</b> ft. MSL or <b>8.0</b> ft.	
I. Well bottom <b>740.2</b> ft. MSL or <b>18.1</b> ft.	
J. Filter pack, bottom <b>740.2</b> ft. MSL or <b>18.1</b> ft.	
K. Borehole, bottom <b>738.3</b> ft. MSL or <b>20.0</b> ft.	
L. Borehole, diameter <b>8.5</b> in.	
M. O.D. well casing <b>2.40</b> in.	
N. I.D. well casing <b>2.00</b> in.	

I hereby certify that the information on this form is true and correct to the best of my knowledge.  
Signature Thomas J. Karwoski Firm Warzyn Inc. MWCONST

Please complete both sides of this form and return to the appropriate DNR office listed at the top of this form as required by chs. 144, 147 & 160, Wis. Stats., and ch. NR 141, Wis. Ad. Code. In accordance with Ch. 144, Wis. Stats., failure to file this form may result in a forfeiture of not less than \$10, nor more than \$5000 for each day of violation. In accordance with ch. 147, Wis. Stats., failure to file this form may result in a forfeiture of not more than \$10,000 for each day of violation. NOTE: Shaded areas are for DNR use only. See instructions for more information including where the completed form should be sent.

**Notice:** Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

**Verification Only of Fill and Seal**

**Route to DNR Bureau:**

Drinking Water       Watershed/Wastewater       Remediation/Redevelopment  
 Waste Management       Other: \_\_\_\_\_

**1. Well Location Information**      **2. Facility / Owner Information**

County <b>Waukesha</b>		WI Unique Well # of Removed Well <b>NH098</b>	Hicap # <b>N/A</b>
Latitude / Longitude (see instructions) <b>43.185239</b> N <b>88.065244</b> W		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input checked="" type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001
¼ / ¼ SE or Gov't Lot #	¼ NE	Section <b>1</b>	Township <b>8 N</b>
Well Street Address <b>W124 Boundary Road</b>		Range <b>21</b>	Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well City, Village or Town <b>Menomonee Falls</b>		Well ZIP Code <b>53051</b>	
Subdivision Name		Lot #	

Facility Name <b>Boundary Road Landfill</b>		
Facility ID (FID or PWS) <b>26862940</b>		
License/Permit/Monitoring # <b>WDNR #0011</b>		
Original Well Owner <b>Waste Management</b>		
Present Well Owner <b>Waste Management</b>		
Mailing Address of Present Owner <b>W124 Boundary Road</b>		
City of Present Owner <b>Menomonee Falls</b>	State <b>WI</b>	ZIP Code <b>53051</b>

Reason for Removal from Service <b>No longer monitored</b>	WI Unique Well # of Replacement Well <b>NA</b>
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**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>10/22/1992</b>
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.
<input type="checkbox"/> Borehole / Drillhole	
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>11.9</b>	Casing Diameter (in.) <b>2</b>
Lower Drillhole Diameter (in.) <b>8.5</b>	Casing Depth (ft.) <b>4.9</b>
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)? <b>3.0</b>	Depth to Water (feet) <b>Dry</b>

**4. Pump, Liner, Screen, Casing & Sealing Material**


Pump and piping removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Did sealing material rise to surface?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If yes, was hole retopped?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Required Method of Placing Sealing Material	
<input type="checkbox"/> Conductor Pipe-Gravity	<input type="checkbox"/> Conductor Pipe-Pumped
<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips)	<input type="checkbox"/> Other (Explain): _____
Sealing Materials	
<input type="checkbox"/> Neat Cement Grout	<input type="checkbox"/> Concrete
<input type="checkbox"/> Sand-Cement (Concrete) Grout	<input checked="" type="checkbox"/> Bentonite Chips
For Monitoring Wells and Monitoring Well Boreholes Only:	
<input checked="" type="checkbox"/> Bentonite Chips	<input type="checkbox"/> Bentonite - Cement Grout
<input type="checkbox"/> Granular Bentonite	<input type="checkbox"/> Bentonite - Sand Slurry

5. Material Used to Fill Well / Drillhole	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
<b>3/8" Bentonite Chips</b>	Surface	7.9	40 pounds	

**6. Comments**

MW-115, total well depth was originally 11.9ft below ground surface. Measured well depth was 7.9ft. The well casing was removed to 7.9ft and the protective steels pipe was removed with the drill rig. The hole was then filled with bentonite chips.

**7. Supervision of Work**

Name of Person or Firm Doing Filling & Sealing <b>Tetra Tech</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>08/04/2021</b>	<b>DNR Use Only</b>	
Street or Route <b>8413 Excelsior Drive, Suite 160</b>		Telephone Number <b>( 630 ) 410-7725</b>	Date Received	Noted By
City <b>Madison</b>	State <b>WI</b>	ZIP Code <b>53717</b>	Signature of Person Doing Work 	
			Date Signed <b>8/22/2021</b>	



Facility/Project Name <b>Boundary Road Landfill</b>	Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> E. <input type="checkbox"/> S. <input type="checkbox"/> W.	Well Name <b>MW115</b>
Facility License, Permit or Monitoring Number	Grid Origin Location Lat. _____ Long. _____ or _____	Wis. Unique Well Number _____ DNR Well Number _____
Type of Well Water Table Observation Well <input checked="" type="checkbox"/> 11 Piezometer <input type="checkbox"/> 12	St. Plane <b>437977</b> ft. N. <b>2515987</b> ft. E.	Date Well Installed <b>10-22-92</b>
Distance Well Is From Waste/Source Boundary <b>400</b> ft.	Section Location of Waste/Source <input checked="" type="checkbox"/> E. <input type="checkbox"/> W.	Well Installed By: (Person's Name and Firm) <b>T. Karwoski - Warzyn Inc.</b>
Is Well A Point of Enforcement Std. Application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input checked="" type="checkbox"/> Not Known	

A. Protective pipe, top elevation <b>764.37</b> ft. MSL	1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation <b>764.25</b> ft. MSL	2. Protective cover pipe: a. Inside diameter: <b>3.8</b> in. b. Length: <b>7.0</b> ft. c. Material: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> 04 <b>Anodized Aluminum</b> d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, describe: _____
C. Land surface elevation <b>761.0</b> ft. MSL	3. Surface seal: <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete <input type="checkbox"/> Other _____
D. Surface Seal, bottom <b>758.0</b> ft. MSL or <b>3.0</b> ft.	4. Material between well casing and protective pipe: <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Annular space seal <input type="checkbox"/> Other _____

12. USCS classification of soil near screen:  
GP  GM  GC  GW  SW  SP   
SM  SC  ML  MH  CL  CH   
Bedrock

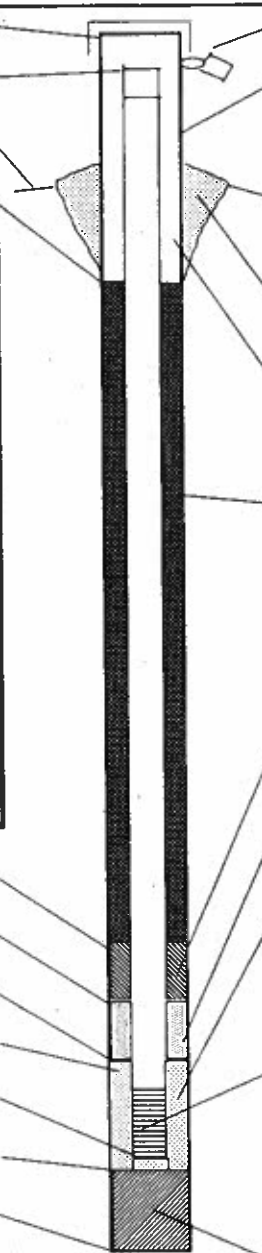
13. Sieve analysis attached?  Yes  No

14. Drilling method used:  
Rotary  50  
Hollow Stem Auger  41  
Other

15. Drilling fluid used: Water  02 Air  01  
Drilling Mud  03 None  99

16. Drilling additives used?  Yes  No  
Describe \_\_\_\_\_

17. Source of water (attach analysis):  
City of Milwaukee



E. Bentonite seal, top <b>761.0</b> ft. MSL or <b>0.0</b> ft.	5. Annular space seal: a. Granular Bentonite <input checked="" type="checkbox"/> 3 b. _____ Lbs/gal mud weight... Bentonite-sand slurry <input type="checkbox"/> 35 c. _____ Lbs/gal mud weight... Bentonite slurry <input type="checkbox"/> 31 d. _____ % Bentonite... Bentonite-cement grout <input type="checkbox"/> 5 e. <b>0.7</b> cu ft volume added for any of the above f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input checked="" type="checkbox"/> 0
F. Fine sand, top <b>758.0</b> ft. MSL or <b>3.0</b> ft.	6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 3 b. <input type="checkbox"/> 1/4 in. <input type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite pellets <input type="checkbox"/> 32 c. Other <input type="checkbox"/>
G. Filter pack, top <b>757.5</b> ft. MSL or <b>3.5</b> ft.	7. Fine sand material: Manufacturer, product name & mesh size a. <b>Badger Mining corporation Fine Mesh Silica</b> b. Volume a <b>0.12</b> cu ft
H. Screen joint, top <b>756.1</b> ft. MSL or <b>4.9</b> ft.	8. Filter pack material: Manufacturer, product name & mesh size a. <b>American Mat's Red Flint #30</b> b. Volume added <b>2.0</b> cu ft
I. Well bottom <b>749.1</b> ft. MSL or <b>11.9</b> ft.	9. Well casing: <input checked="" type="checkbox"/> Flush threaded PVC schedule 40 <input type="checkbox"/> 23 <input type="checkbox"/> Flush threaded PVC schedule 80 <input type="checkbox"/> 24 Other <input type="checkbox"/>
J. Filter pack, bottom <b>749.0</b> ft. MSL or <b>12.0</b> ft.	10. Screen material: <b>Sch 40 PVC</b> a. Screen type: Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> Other <input type="checkbox"/>
K. Borehole, bottom <b>749.0</b> ft. MSL or <b>12.0</b> ft.	b. Manufacturer <b>Diedrich</b> c. Slot size: <b>0.01</b> in. d. Slotted length: <b>7.0</b>
L. Borehole, diameter <b>8.5</b> in.	11. Backfill material (below filter pack): <input checked="" type="checkbox"/> None <input type="checkbox"/> Other _____
M. O.D. well casing <b>2.40</b> in.	
N. I.D. well casing <b>2.00</b> in.	

I hereby certify that the information on this form is true and correct to the best of my knowledge.

Signature *Thomas J. Karwoski*

Firm **Warzyn Inc.**

MWCOI

Please complete both sides of this form and return to the appropriate DNR office listed at the top of this form as required by chs. 144, 147 & 160, Wis. Stats., and ch. NR 141, Wis. Ad. Code. In accordance with Ch. 144, Wis. Stats., failure to file this form may result in a forfeiture of not less than \$10, nor more than \$5000 for each day of violation. In accordance with ch. 147, Wis. Stats., failure to file this form may result in a forfeiture of not more than \$10,000 for each day of violation. NOTE: Shaded areas are for DNR use only. See instructions for more information including where the completed form should be sent.

**Attachment B**

WDNR Well Information Form

