

First Water Quality Test For
WISCONSIN UNIQUE WELL NUMBER AZ 367

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

SEP 28 1988

Property Owner Russell Jacobus Telephone Number (608) 872-2551
 Mailing Address RR 2 Box 259 B
 City Boscobel State WI Zip Code 53805
 County Crawford County Well Location Permit No. W Well Completion Date 09/16/88
 M M D D Y Y

1. Location (Please type or print using a black pen.)
 Town City Village Fire # (if available)
 of Scott
 Grid or Street Address or Road Name and Number (if available)

Well Constructor (Business Name) Coyplan Well Drilling Registration # 75
 Address 501 E. Oak
 City Boscobel State WI Zip Code 53805

2. Mark well location in correct 40-acre parcel of section.
 N

 S
 W E

Subdivision Name _____ Lot # _____ Block # _____
 Gov't Lot # _____ or NW 1/4 of SE 1/4 of Section 29; T 9 N; R 3 E W

3. Well Type New
 Replacement Reconstruction/Rehabilitation
 of well constructed in 19 _____
 Reason for new, reconstructed, replaced, or rehabilitated well?
New Dwelling
 Drilled Driven Point Jetted Other _____

4. Well serves 1 of homes _____ (ex: barn, restaurant, church, school, industry, etc.)
 High Capacity Well? Yes No
 High Capacity Property? Yes No

5. Well Located on Highest Point of Property, Consistent with the General Layout and Surroundings? Yes No
 Well Located in Floodplain? Yes No
 Distance In Feet From Well To Nearest:
 1. Landfill 15
 2. Building Overhang 35
 3. Septic or 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 _____
 16. Clearwater Sump _____
 17. Wastewater Sump _____
 18. Paved Animal Barn Pen _____
 19. Animal Yard or Shelter _____
 20. Silo - Type _____
 21. Barn Gutter _____
 22. Manure Pipe Gravity Pressure _____
 Cast Iron or Plastic Other _____
 23. Other Manure Storage _____
 Other NR 112 Waste Source _____
 24. _____

6. Drillhole Dimensions

Dia. (in.)	From (ft.)	To (ft.)
10	surface	63
6	63	100

 Method of constructing upper enlarged drillhole. (If applicable - more than one.)
 1. Rotary - Mud Circulation
 2. Rotary - Air
 3. Rotary - Foam
 4. Reverse Rotary
 5. Cable-tool Bit _____ in. dia.
 6. Temp. Outer Casing 10 in. dia. Removed? Yes No
 If no, explain _____
 7. Other _____

9. Geology

Type, Caving/Noncaving, Color, Hardness, Etc.	From (ft.)	To (ft.)
<u>IG dirt & loose rock</u>	surface	25
<u>SH - soft shale</u>	25	53
<u>HH - hard slate</u>	53	100

7. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Mfg. & Method of Assembly	From (ft.)	To (ft.)
6	<u>New black Steel</u>	surface	63
	<u>Plain End</u>		
	<u>ERW ASTM A-53</u>		
	<u>6x21 #18.97</u>		
Dia. (in.)	screen type and material	From	To

10. Static Water Level _____ ft. above ground level
92 ft. below ground surface
 11. Pump Test
 Pumping Level 66 ft. below surface
 Pumping at 7 GPM for 7 hours
 12. Well Is:
29 in. 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.)	Sacks Cement
<u>Tramee</u>				
	<u>Neat Cement</u>	surface	63	14

13. Were all unused, noncomplying, or unsafe wells properly filled with sealant?
 Yes No If no, explain _____
 14. Signature of Well Constructor Michael D. Beinborn MDB Date Signed 9-26-88
 Signature of Drill Rig Operator Michael D. Beinborn MDB Date Signed 9-26-88