

**Summary of Drilling and Well Installation Program
Chequamegon-Nicolet National Forest
Medford Unit well TA-217**

WGNHS monitoring well number: TA-217

USGS site number: 451836090354801

Site description: on west side of FR#112 approximately 3200 ft. south of FR#114,
Taylor County, WI Medford-Park Falls District

Site Lithology (based on auger cuttings):

0-24 ft.: Poorly graded sand to silty sand w/ gravel, brown to reddish brown, moist,
wet @ 15 ft.

24-30 ft: Clayey/silty sand w/ trace gravel, red brown, wet.

Set well @ 30 ft. below grade w/ 15 ft. long screen, see well construction diagram on
following page.

Site description prepared by: Peter M. Chase, P.G./WGNHS/ July 15, 2011

Route to: Watershed/Wastewater ☐ Waste Management ☐
Remediation/Redevelopment ☐ Other ☐

MONITORING WELL CONSTRUCTION
Form 4400-113A Rev. 7-98

Facility/Project Name USFS - CHEQ - NLC		Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> E. <input type="checkbox"/> S. <input type="checkbox"/> W.		Well Name BEND #1	
Facility License, Permit or Monitoring No.		Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input checked="" type="checkbox"/> Lat. 45° 18' 36.15" Long. 90° 35' 48.02"		Wis. Unique Well No. DNR Well ID No.	
Facility ID		St. Plane _____ ft. N. _____ ft. E. S/C/N		Date Well Installed 05/02/2011 m m d d y y y y	
Type of Well Well Code 1		Section Location of Waste/Source NE 1/4 of NW 1/4 of Sec. 27, T. 33 N. R. 2 E		Well Installed By: Name (first, last) and Firm Pete Chase	
Distance from Waste/Source _____ ft.		Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known		Gov. Lot Number	
Enf. Stds. Apply <input type="checkbox"/>				WGNHS	

A. Protective pipe, top elevation _____ ft. MSL		1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
B. Well casing, top elevation _____ ft. MSL		2. Protective cover pipe: a. Inside diameter: _____ in. b. Length: _____ ft. c. Material: Steel <input checked="" type="checkbox"/> 04 Other <input type="checkbox"/>	
C. Land surface elevation _____ ft. MSL		d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, describe: _____	
D. Surface seal, bottom _____ ft. MSL or _____ ft.		3. Surface seal: Bentonite <input checked="" type="checkbox"/> 30 Concrete <input type="checkbox"/> 01 Other <input type="checkbox"/>	
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 type="checkbox"/> SM <input checked="" type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/> Bedrock <input type="checkbox"/>		4. Material between well casing and protective pipe: Sand Bentonite <input type="checkbox"/> 30 Other <input checked="" type="checkbox"/>	
13. Sieve analysis performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		5. Annular space seal: a. Granular/Chipped 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. _____ Ft ³ 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	
14. Drilling method used: Rotary <input type="checkbox"/> 50 Hollow Stem Auger <input checked="" type="checkbox"/> 41 Other <input type="checkbox"/>		6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33 b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input type="checkbox"/> 32 c. _____ Other <input type="checkbox"/>	
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		7. Fine sand material: Manufacturer, product name & mesh size a. _____ b. Volume added _____ ft ³	
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. Filter pack material: Manufacturer, product name & mesh size a. Native + #30 Red flint b. Volume added _____ ft ³	
Describe _____		9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23 Flush threaded PVC schedule 80 <input type="checkbox"/> 24 Other <input type="checkbox"/>	
17. Source of water (attach analysis, if required):		10. Screen material: PVC a. Screen type: Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> 01 Other <input type="checkbox"/>	
E. Bentonite seal, top _____ ft. MSL or 0.5 ft.		b. Manufacturer _____ c. Slot size: 0.010 in. d. Slotted length: 15 ft.	
F. Fine sand, top _____ ft. MSL or 12 ft.		11. Backfill material (below filter pack): None <input checked="" type="checkbox"/> 14 Other <input type="checkbox"/>	
G. Filter pack, top _____ ft. MSL or 13 ft.			
H. Screen joint, top _____ ft. MSL or 15 ft.			
I. Well bottom _____ ft. MSL or 30 ft.			
J. Filter pack, bottom _____ ft. MSL or 30 ft.			
K. Borehole, bottom _____ ft. MSL or 30 ft.			
L. Borehole, diameter 8 in.			
M. O.D. well casing 2.2 in.			
N. I.D. well casing 2.0 in.			

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

Signature *Pete M. Chase* Firm Wis. Geological & Natural History Survey

Please complete both Forms 4400-113A and 4400-113B and return them to the appropriate DNR office and bureau. Completion of these reports is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file these forms may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on these forms is not intended to be used for any other purpose. NOTE: See the instructions for more information, including where the completed forms should be sent.