

Route To: Watershed/Wastewater
Remediation/Redevelopment

Waste Management
Other Main Office

Facility/Project Name gINT Example	County	Rock	Well Name MW-1
Facility License, Permit or Monitoring Number 123456789	County Code 54	Wis. Unique Well Number AA000	DNR Well Number 123

1. Can this well be purged dry? Yes No
2. Well development method:
- surged with bailer and bailed 4 1
 - surged with bailer and pumped 6 1
 - surged with block and bailed 4 2
 - surged with block and pumped 6 2
 - surged with block, bailed, and pumped 7 0
 - compressed air 2 0
 - bailed only 1 0
 - pumped only 5 1
 - pumped slowly 5 0
 - other _____
3. Time spent developing well **120 min.**
4. Depth of well (from top of well casing) **14.9 ft.**
5. Inside diameter of well **3.00 in.**
6. Volume of water in filter pack and well casing **30.0 gal.**
7. Volume of water removed from well **40.0 gal.**
8. Volume of water added (if any) **15.0 gal.**
9. Source of water added Street hydrant 100 feet west of
hole
10. Analysis performed on water added? Yes No
(If yes, attach results)

	Before Development	After Development
11. Depth to Water (from top of well casing)	a. 9.00 ft.	8.00 ft.
Date	b. 7/8/1999	7/8/1999
Time	c. 10:00 <input checked="" type="checkbox"/> a.m. <input type="checkbox"/> p.m.	03:00 <input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m.
12. Sediment in well bottom	10.0 inches	1.0 inches
13. Water clarity	Clear <input type="checkbox"/> 1 0 Turbid <input checked="" type="checkbox"/> 1 5 (Describe) <u>Dark brown</u>	Clear <input checked="" type="checkbox"/> 2 0 Turbid <input type="checkbox"/> 2 5 (Describe) <u>Very light brownish tint</u>
Fill in if drilling fluids were used and well is at solid waste facility:		
14. Total suspended solids	10.0 mg/l	2.0 mg/l
15. COD	20.0 mg/l	5.0 mg/l
16. Well developed by: Person's Name and Firm John Smith ABC Well Installers		

17. Additional comments on development:
None.

Facility Address or Owner/Responsible Party Address	I hereby certify that the above information is true and correct to the best of my knowledge.
Name: <u>Tom Jones</u>	Signature: _____
Firm: <u>MNO Developers</u>	Print Name: <u>Jane Doe</u>
Street: <u>4321 Grand Avenue</u>	Firm: <u>ACME Consults</u>
City/State/Zip: <u>Somewhere, WI 53555</u>	

NOTE: See instructions for more information including a list of county codes and well type codes.