

# Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

**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		WI Unique Well # of Removed Well		Hicap #	
Latitude / Longitude (see instructions)		Format Code		Method Code	
_____ N		<input type="checkbox"/> DD		<input type="checkbox"/> GPS008	
_____ W		<input type="checkbox"/> DDM		<input type="checkbox"/> SCR002	
_____ N		<input type="checkbox"/> OTH001			
1/4 / 1/4	1/4	Section	Township	Range	<input type="checkbox"/> E
or Gov't Lot #		N		<input type="checkbox"/> W	
Well Street Address					
Well City, Village or Town					
Well ZIP Code					
Subdivision Name					
Lot #					
Reason for Removal from Service					
WI Unique Well # of Replacement Well					

Facility Name		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner		
Present Well Owner		
Mailing Address of Present Owner		
City of Present Owner		State
		ZIP Code

**3. Filled & Sealed Well / Drillhole / Borehole Information**

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

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input type="checkbox"/> Yes	<input 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 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 type="checkbox"/> Bentonite Chips	
<i>For Monitoring Wells and Monitoring Well Boreholes Only:</i>			
<input 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

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy)	Date Received	Noted By
Street or Route			Telephone Number ( )	Comments	
City	State	ZIP Code	Signature of Person Doing Work	Date Signed	

# Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

## Instructions

### Well Filling and Sealing

Wisconsin Administrative Code (NR 811, NR 812, and NR 141 requires well owners to permanently fill and seal any unused wells/drillholes/boreholes on their property. **As of June 1, 2008 water supply wells can only be filled and sealed by licensed well drillers and pump installers.**

1. Remove any pump, pump piping, debris or other obstacles that could interfere with the sealing operation.
2. Except when bentonite chips are used, the sealing material must be placed with the use of a conductor (tremie) pipe to fill the entire well column to the top with required sealing material. Refer to NR 812 and NR 141 for more details on filling and sealing requirements.

**General Instructions:** Fill out Well/Drillhole/Borehole Filling & Sealing Report Form 3300-005 as completely as possible for each well or borehole filled and sealed. Information should be provided for every box on the form where available. Sign each form. Please note that these forms are subject to change. (Personally identifiable information on these forms is not intended to be used for any other purpose.)

**Verification Only of Fill and Seal:** If you are only verifying that filling and sealing has previously occurred on a well and are NOT performing any filling and sealing work on the well, check the box near the top of the form. Complete Parts 1 and 2 of the form completely and any information you can provide in Parts 3, 4 and 5. You must provide comments in Part 6 as to the method used to verify both the filling and sealing of the well. Complete Part 7, including the date of Filling and Sealing or verification. It will be implied that you did do the filling and sealing work or the verification as stated in Part 7.

**Route to:** Check the appropriate routing box on the top of the form to assure proper routing to the DNR program requiring this well be filled and sealed. Mail the form and any attachments to the Department of Natural Resources, PO Box 7921, Madison, WI 53707-7921.

If you do any work to fill or seal the well, you must complete this form as intended and do not check the Verification Only of Fill and Seal box.

#### (1) WELL LOCATION INFORMATION

**WI Unique Well #:** Fill in the 2 alphabetic and 3 numeric Wisconsin Unique Well Number (WUWN) of the well being filled and sealed. Check the well, sample tap in the house or the fuse box for a WUWN if one has been assigned to the well.

**Hicap #:** If this was a high capacity well, enter the number assigned to the well by the Department.

**Well Location:** Locate the well by Public Land Survey (Gov't Lot or  $\frac{1}{4}$   $\frac{1}{4}$ ,  $\frac{1}{4}$ , Section, Township and Range) AND latitude and longitude coordinates, using GPS or on-line map locators.

**Format Code:** Check which format you are reporting in: DD = Decimal Degrees \_\_\_ ° . \_\_\_ ' \_\_\_ " or DDM = Degrees Decimal Minutes \_\_\_ ° \_\_\_ ' \_\_\_ " (Place decimal point appropriately).

**Method Code:** Check which method you are using to determine latitude/longitude: GPS008 = GPS Receiver; SCR002 = Online Map/Viewer; OTH001 = Other.

#### (2) FACILITY / OWNER INFORMATION

If the well is located at a commercial or government facility, fill in the name of landfill, wastewater treatment facility, surface impoundment, spill or project.

**Facility ID:** Fill in the nine digits Facility ID (FID or PWS) assigned to the site by the Department.

**License/Permit/Monitoring #:** Fill in number assigned to facility by the Department. If unknown, leave blank.

**Present Well Owner:** Fill in the name, address, city, state and ZIP code of the present owner.

#### (3) FILLED & SEALED WELL/DRILLHOLE/BOREHOLE INFORMATION

**Original Construction Date:** Fill in the original date of construction for the well or boring in mm/dd/yyyy format. This section should include information about the original well.

**Depth to Water:** Enter depth to water from ground surface.

- (4) **PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL:** Check only one box where Yes, No or Not Applicable is indicated. Check all boxes which apply otherwise.

- (5) **MATERIAL USED TO FILL THE WELL/DRILLHOLE:** Enter the description of the filling material, the depth From and To, circle one measurement unit (Yards, Sacks or Volume), and enter the mix ratio or mud weight (in pounds per gallon).

- (6) **COMMENTS:** Describe any of the above boxes in more detail or add information as required to describe the filling and sealing procedures.

- (7) **NAME OF PERSON OR FIRM DOING SEALING WORK:** Enter the name (first and last) or firm name, address, and phone number of the person who supervised the work.

**Date of Filling & Sealing or Verification:** List Month/Day/Year (mm/dd/yyyy) the well was filled & sealed or verified filled & sealed.