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State of Wisconsin
Department of Natural Resources
dnr.wi.gov

Property Transfer Well(s) and Pressure System(s) Inspection

Form 3300-221 (R 10/14)

Notice: Pursuant to ch. 280, Wis. Stats., and ch. NR 812, Wis. Adm. Code, this form shall be used to document any well and pressure system inspection conducted as part of a property transfer. Inspections are voluntary, and well owners are not required to bring systems into compliance as a result of the inspection. Inspectors must provide the completed form to the requester of the inspection. Do not send forms to DNR.

Contact Information

Inspection Requested By	Telephone Number
Special Properties LLC - Desiree Brush	(920) 294-0122

Mailing Address	City	State	ZIP Code
PO Box 252	Green Lake	WI	54941

Owner's Name	Telephone Number
Allison C White	

Mailing Address	City	State	ZIP Code
N6138 N Lawson Dr	Green Lake	WI	54941

Property Location

County of Water System Location	Grid or Street Address or Road Name and Number (if available)	City	ZIP Code
Green Lake	N6138 N LAWSON DR	Green Lake	54941

Township	Gov't Lot #	¼	¼	Section	Town	Range	E/W	Unique Well Number
Brooklyn	002	SW of the	SE	16	16 N	13	E	

Known Noncomplying Features

Identified noncomplying features are noted below with a check mark.

1. ☐ Unused Well Should be Filled and Sealed
2. ☐ Stovepipe or Thin-Walled Casing
3. ☐ Dug Well
4. ☐ Unprotected Buried Suction Line
5. ☐ Alcove (Subsurface Pumproom) or Pit
6. ☐ Non-Walkout Basement or Below-Grade Crawl Space Well
7. ☐ Poor Casing Condition (Badly Corroded or Cracked)
8. ☐ Contaminant Source less than minimum separation distance from well: _____
9. ☐ Well in Floodway or Flood Fringe
10. ☐ Well at Risk from Localized Flooding
11. ☐ Cross-Connection
12. ☐ Driven Point Well (installed after 1-31-1991) without construction report
13. ☐ Nonpressure Conduit
14. ☐ Hand Pump
15. ☐ Offset Pump or Piping Height < 12" Above Floor
16. ☐ Yard Hydrant
17. ☐ Materials for Pump and Supply Piping
18. ☐ Flowing Well Installation
19. ☐ Check Valve Location
20. ☐ Well Cap or Seal
21. ☐ Casing Height
22. ☐ Electrical Wires Not Properly Enclosed in Conduit
23. ☐ Sample Faucet is Missing or Incorrect
24. ☐ Casing less than 6" in diameter for a well in limestone, dolomite, shale, quartz or granite
25. ☐ Health/Safety Hazard

Comments

- ☐ Pre-1991 Driven Point Pipe Depth < 25 feet
- ☒ Well Construction Report Not on File or Unlocatable
- ☐ Well Located in Special Well Casing Depth Area
- ☐ Pre-1979 Two-Wire Submersible Pump
- ☐ Evidence of Some Corrosion on Well Casing Pipe
- ☐ Inaccessible or Difficult Location for Future Well Work
- ☐ Inaccessible or Difficult Location for Future Pump Work
- ☐ Non-Vermin-Proof Well Cap or Well Seal
- ☐ Other:

Based on my personal inspection of the real property, the well(s) and pressure system(s): ☒ **Complies** ☐ **Does not comply** with Wis. Adm. Code.

☐ More comprehensive or additional research is needed regarding:
☐ an unused well ☐ floodways/floodplains ☐ contaminant sources ☐ other:

This form lists the visible conditions of the well(s) and pressure system(s) on the property at the time of inspection and does not imply or give any guarantee.

Signature of Licensed Water Well Driller or Pump Installer	Individual License #	Date	Telephone Number
Luke Ladwig	6797	05/12/2022	(920) 295-6314