

119729

County Le Sueur  
Quad Le Center  
Quad ID 73B

MINNESOTA DEPARTMENT OF HEALTH  
WELL AND BORING REPORT  
Minnesota Statutes Chapter 1031

Entry Date 02/08/1990  
Update Date 05/28/2026  
Received Date

|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           |                                                                                                                                                      |                                |  |                                       |                              |  |  |  |
|-----------------------------------------------------------------------------------------------------------------|--|--|--|--|------------------------------------------------------------------------------------|--|-----------------|--|-------------------------|--|--------------------------|--|---------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|--|---------------------------------------|------------------------------|--|--|--|
| <b>Well Name</b> WIELAND,<br><b>Elevation</b> 1074<br><b>Address</b><br>Contact RR 2 BOX 29A LE CENTER MN 56057 |  |  |  |  | <b>Township</b> 111<br><b>Elev. Method</b> 7.5 minute topographic map (+/- 5 feet) |  | <b>Range</b> 24 |  | <b>Dir Section</b> W 28 |  | <b>Subsection</b> DDDDAB |  | <b>Well Depth</b> 471 ft. |                                                                                                                                                      | <b>Depth Completed</b> 471 ft. |  | <b>Date Well Completed</b> 08/07/1979 |                              |  |  |  |
| <b>Stratigraphy Information</b>                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Drill Method</b> Non-specified Rotary                                                                                                             |                                |  |                                       | <b>Drill Fluid</b>           |  |  |  |
| Geological Material From To (ft.) Color Hardness                                                                |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Use</b> domestic                                                                                                                                  |                                |  |                                       | <b>Status</b> Active         |  |  |  |
| CLAY 0 38 BROWN MEDIUM                                                                                          |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Well Hydrofractured?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                 |                                |  |                                       | <b>From</b> <b>To</b>        |  |  |  |
| CLAY & ROCKS 38 280 GRAY MEDIUM                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Casing Type</b> Step down                                                                                                                         |                                |  |                                       | <b>Joint</b>                 |  |  |  |
| CLAY (SOAPSTONE) 280 301 BROWN SOFT                                                                             |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Drive Shoe?</b> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                                                               |                                |  |                                       | <b>Above/Below</b> 1 ft.     |  |  |  |
| ROTTEN LIMESTONE 301 334 DK. BRN MEDIUM                                                                         |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Casing Diameter</b>                                                                                                                               |                                |  |                                       | <b>Weight</b>                |  |  |  |
| LIMESTONE 334 438 RED HARD                                                                                      |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | 4 in. To 302 ft. 11 lbs./ft.                                                                                                                         |                                |  |                                       |                              |  |  |  |
| SANDROCK 438 471 WHITE MEDIUM                                                                                   |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | 3 in. To 335 ft. lbs./ft.                                                                                                                            |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Open Hole</b> From 335 ft. To 471 ft.                                                                                                             |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Screen?</b> <input type="checkbox"/>                                                                                                              |                                |  |                                       | <b>Type</b> <b>Make</b>      |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           |                                                                                                                                                      |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Static Water Level</b>                                                                                                                            |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | 172 ft. land surface                                                                                                                                 |                                |  |                                       | Measure 08/07/1979           |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Pumping Level (below land surface)</b>                                                                                                            |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Wellhead Completion</b>                                                                                                                           |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | Pitless adapter manufacturer YES Model                                                                                                               |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <input type="checkbox"/> Casing Protection <input type="checkbox"/> 12 in. above grade                                                               |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <input type="checkbox"/> At-grade (Environmental Wells and Borings ONLY)                                                                             |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Grouting Information</b> Well Grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Specified |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | Material Amount From To                                                                                                                              |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | bentonite 0 0 ft. 302 ft.                                                                                                                            |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Nearest Known Source of Contamination</b>                                                                                                         |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | 85 feet Southwes Direction                                                                                                                           |                                |  |                                       | Septic tank/drain field Type |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Pump</b> <input type="checkbox"/> Not Installed Date Installed 08/07/1979                                                                         |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | Manufacturer's name FLINT AND WALLING                                                                                                                |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | Model Number BA HP 0.75 Volt 220                                                                                                                     |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | Length of drop pipe 199 ft Capacity 10 g.p. Typ Submersible                                                                                          |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Abandoned</b>                                                                                                                                     |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | Does property have any not in use and not sealed well(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No                                   |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Variance</b>                                                                                                                                      |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | Was a variance granted from the MDH for this well? <input type="checkbox"/> Yes <input type="checkbox"/> No                                          |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Miscellaneous</b>                                                                                                                                 |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | First Bedrock Prairie Du Chien Group                                                                                                                 |                                |  |                                       | Aquifer multiple             |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | Last Strat Jordan Sandstone                                                                                                                          |                                |  |                                       | Depth to Bedrock 301 ft      |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | Located by Minnesota Geological Survey                                                                                                               |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | Locate Method Digitized - scale 1:24,000 or larger (Digitizing Table)                                                                                |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | System UTM - NAD83, Zone 15, Meters X 443569 Y 4914895                                                                                               |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | Unique Number Verification Information from Input Date 01/01/1990                                                                                    |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Angled Drill Hole</b>                                                                                                                             |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | <b>Well Contractor</b>                                                                                                                               |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | Hartmann Well Co. 40174 O'BRIEN, M                                                                                                                   |                                |  |                                       |                              |  |  |  |
|                                                                                                                 |  |  |  |  |                                                                                    |  |                 |  |                         |  |                          |  |                           | Licensee Business Lic. or Reg. No. Name of Driller                                                                                                   |                                |  |                                       |                              |  |  |  |