

State of Wisconsin
DEPARTMENT OF NATURAL RESOURCES
FITCHBURG SERVICE CENTER
3911 FISH HATCHERY RD
FITCHBURG WI 53711

Tony Evers, Governor
Adam N. Payne, Secretary
Telephone 608-267-7556
Toll Free 1-888-936-7463
TTY Access via relay - 711



July 19, 2023

FILE REF:

WINNIFRED SCHUMANN
SADDLE RIDGE ESTATES
599 SADDLE RIDGE
PORTAGE, WI 53901

PWS ID#: 11101233
Saddle Ridge Estates-OC
Columbia County

Subject: Sanitary Survey Report

Dear Winnifred Schumann:

The purpose of a sanitary survey is to evaluate your water system's source, facilities, equipment, operation, maintenance, and management as they relate to providing safe drinking water. The sanitary survey is also an opportunity to update the Department's records, provide technical assistance, and identify potential risks that may adversely affect drinking water quality.

On 7/18/2023, Tony Knipfer conducted a sanitary survey of your water system, Saddle Ridge Estates. During the sanitary survey Lukasz Lyzwa was present. At the completion of the survey, Lukasz was briefed on the preliminary findings. This report outlines the final findings, discusses problems that need to be addressed, and timelines for corrective action where appropriate.

Deficiencies

During the course of the sanitary survey, 0 deficiencies were identified. Deficiencies are problems in the drinking water system that have the potential to cause serious health risks or represent long-term health risks to consumers. These deficiencies may indicate noncompliance with one or more Wisconsin Administrative Codes. Corrective action should be completed for these deficiencies as soon as possible. If there were any significant deficiencies identified above, those should undergo corrective action first.

Discussion and Schedule for Correction of Deficiencies: None

Recommendations

During the course of the sanitary survey 2 recommendations were identified. Recommendations are potential problems in the water system that may hinder your public water system from consistently providing safe drinking water to consumers.

Discussion of Recommendations:

- 1) The electrical conduit on Well 1 is loose. Please continue to monitor this and inspect or repair when well work is completed in the future.
- 2) Open, inspect, and clean the interior of the pressure tank.

Non-conforming Features

During the course of the sanitary survey, 1 feature that met code requirements at the time of your public water system's construction but would not be allowed in the current code was discovered. These are referred to as "non-conforming features." Though you are not required to correct this non-conforming feature at this time, it will need to be corrected when any major work is done in the future.

Discussion of Non-conforming Features: Please correct when major well work is completed in the future.

Water Quality Monitoring and Reporting

Your system has a very good record of compliance with monitoring and reporting requirements. We appreciate your sampler's continued efforts in complying with these Safe Drinking Water Act requirements.

Required Reports, Records, and Utility Programs

All required reports, notices, and certifications have been submitted.

Certified Operator

Our records indicate that Lynn Bradley and Scott Gorman are the certified small water system operators for your facility. Lynn's certification is set to expire on 5/1/2025 and Scott's is set to expire on 5/1/2026. Classes to earn recertification can be found on the department's web site at <https://dnr.wisconsin.gov/topic/opcert/training.html>.

Water System Security

We recommend that you conduct a daily security check of your entire drinking water system to ensure doors are locked and windows secured.

System Summary Information

Saddle Ridge Estates is served by two wells. Well 1 (BN390) is located immediately adjacent to the storage reservoir. Well 1 was drilled in 1978 to a total depth of 382 feet and is protected by 360 feet of 8" metal casing. The water bearing formation is gravel, and according to the well construction report the well is not screened. Cement grout was used to fill the top 60 feet of annular space, while bentonite and drill cuttings fill the remaining annular space. The submersible pump in Well 1 discharges through the top of the well casing to a 2400-gallon buried hydropneumatic pressure tank prior to entering the 48000-gallon storage reservoir.

Well 2 (BN391) is an 8 inch well, constructed approximately 800 feet east of Well 1 and the storage reservoir. Well 2 was drilled to a total depth of 333 feet and is protected by 299 feet of steel casing and 80 feet of cement grout. The well is also protected by 80' of cement grout. The water bearing formation is sandy gravel and this well has a 40' screen. The submersible pump in Well 2 discharges through the top of the well casing to the same 2400-gallon below grade hydro-pneumatic pressure tank as Well 1.

From the storage reservoir, three pumps pressurize the distribution system. A stand-by chlorinator is adjacent to Well 1 and used for emergency purposes only. The chemical injection tap is located near the 2400-gallon pressure tank and serves both wells. The facility is served by a backup generator, providing water in the event of a power outage. The backup generator is exercised on Mondays at 9:00 AM. Pressurized plumbing takes wastewater to the city of Portage for treatment.

A water system summary is attached. Please review for accuracy. If there are changes that need to be made, contact Tony Knipfer at 608 228-6227.

Capacity Development Evaluation

This sanitary survey serves as an evaluation of the capabilities of your water system. This system has been determined to have adequate technical, managerial, and financial capacity to provide safe drinking water. The ability to plan for, achieve, and maintain compliance with applicable drinking water standards has been demonstrated.

The next sanitary survey of your system is scheduled to take place in 2026. You will be contacted prior to the survey to schedule a date that is convenient for you.

Required Action

No required actions are due at this time, however, please consider correcting the non-conforming features discussed in this letter.

Thank you for your time and assistance during the sanitary survey. If you have any questions, you can reach me by phone at 608 228-6227, by fax at 608 275-3338, by e-mail at Anthony.knipfer@wisconsin.gov, or by postal mail at the address on this letterhead.

Sincerely,



Tony Knipfer

Encl.

cc: Bureau of Drinking Water/Groundwater - DG/5

Sanitary Survey Checklist for SADDLE RIDGE ESTATES/11101233, Survey Date: 07/18/2023

#	Question	Answer	Comments
I.	Is the source adequate (protection, physical components, capacity)?	N	Non-Conforming Feature- The wells are missing protective cement collars
A.	Are there no new contaminant sources identified?	Y	
B.	Does the well(s) meet the appropriate construction requirements including the elimination of dual aquifer situations? (811.12(1))	Y	
1.	Are well construction reports on file and accurate including reconstruction? (811.12(3))	Y	
C.	Are unused wells properly abandoned (including report on file with DNR)? (811.13 (1) - (8))	N/A	
D.	Is the source capacity adequate to meet current and future demand? (NR 811.26)	Y	
E.	Is the backup source adequate to meet demand including any emergency interconnection? (811.26)	Y	
F.	Are all monitoring waivers valid? (NA if no waivers granted)	Y	
G.	Is the monitoring assessment material accurate and up-to-date? (809.205(5), 809.245(5), 809.115(2) & (3), 809.53(2), 809.547(7), 809.61(1), 809.66(1))	Y	
H.	Are all sources protected from flooding? (811.12(5)(b))	Y	
I.	None of the sources require groundwater under the direct influence of surface water review? (810.02(25)); (810.27); (811.02(34)); (811.16(2)); (811.17(2))	Y	
J.	Are all sources adequately protected from unauthorized access?(810.23); (811.25(c))	Y	
K.	Is the pump base adequate? (extends min. 12" above floor) (811.31 (1)) & (811.32 (1)) (6" high collar)	N	Non-Conforming Feature- The wells are missing protective cement collars

#	Question	Answer	Comments
II.	Is the finished water storage facility(ies) adequate, including pressure tank(s)? (NA if none)	Y	
A.	Are water storage facilities inspected at least once every 5 years? (810.14)	Y	Recommendation- Open, inspect, and clean the interior of the pressure tank
B.	To the best of your knowledge, do the reservoirs meet all of the other NR 811 requirements and is the O & M of the storage facilities adequate? (811 Sub. VII - Hydro Pneumatic Tanks & Sub. IX - Storage Facilities)? Check most recent reservoir inspections.	Y	
C.	Does the paint on the outside of the storage facility(ies) look adequate and clean with no apparent corrosion? (810.14)	Y	
D.	Is the storage capacity sufficient to meet water use demands? (811.62)	Y	
E.	Are adequate security measures in place at the storage facility(ies) to prevent unauthorized access? (NA if no storage) (811.64(2)(d))	Y	
F.	Is emergency power available and adequate for pumping from ground reservoir(s)? (811.27)	Y	Emergency generator is run on Mondays at 9:00 AM
G.	Is the storage facility(ies) protected from flooding? (NA if no storage) (811.63(1) (a), 811.61(1) Hydro-Pneumatic Tanks)	Y	
H.	Is storage protected from contamination? (NA if no storage) (811.62 & 811.63 & 811.61 (1) (Hydro-Pneumatic Tanks))	Y	
I.	Is the condition of the storage components satisfactory? (NA if no storage) (810.03)	Y	
III.	Are the pump(s), discharge piping, pump facility(ies) and controls adequate?	Y	
A.	Is the pumping capacity adequate, with the largest unit out of service, to ensure continued operation (firm pumping capacity) (N/A if 50 or less living units)? (811.26(2))	Y	
B.	Is the pump facility protected from flooding (i.e. pump house floor >2' above flood elevation)? (811.25(1)(d))	Y	

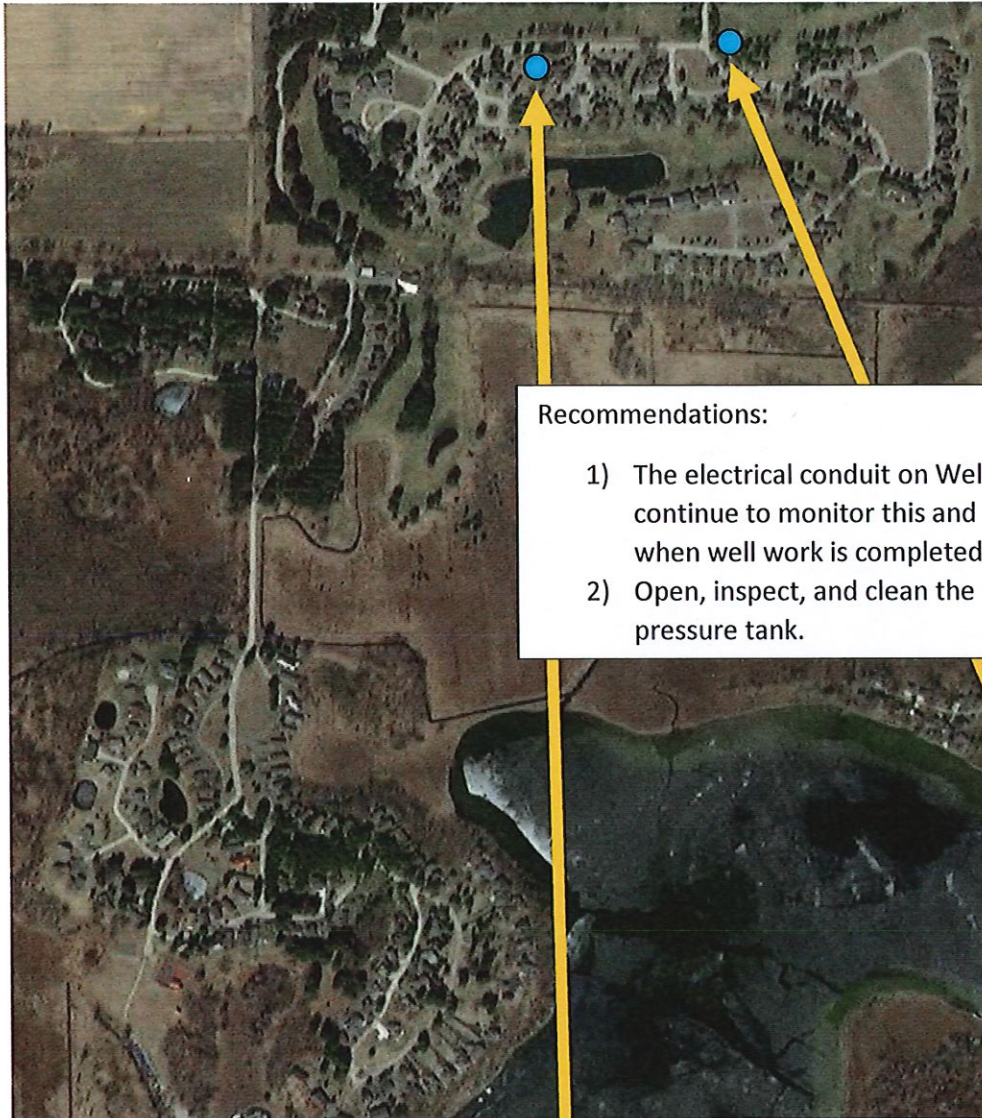
#	Question	Answer	Comments
C.	Is the pumping facility(ies) adequately protected against unauthorized access? (810.23) & ((811.25(c)) for CWS's)	Y	
D.	Is the capacity of the pump(s) sufficient? (811.26); (811.29)	Y	
E.	Is the condition of the pump(s) satisfactory? (810.03)	Y	
F.	Does the pumping system(s) use only approved lubricants? (811.31 (2))	Y	
G.	Are pumping controls adequate and in good working condition?	Y	Recommendation- The electrical conduit on Well 1 is loose. Please continue to monitor this and inspect or repair when well work is completed in the future.
H.	Are the discharge type and/or appurtenances appropriate for the system?	Y	
I.	Does the discharge piping and appurtenances meet NR 811 requirements? (811.37)	Y	
J.	Is the condition of the pump facility(ies) satisfactory? (NA if no facility) (811.25)	Y	
K.	Does the pump facility(ies) meet NR 811 requirements? (NA if no facilities) (811.25)	Y	
IV.	Is the water treatment adequate? (NA if no treatment)	Y	
A.	Is the current treatment adequate for protecting public health, given source water quality?	Y	
B.	Is there adequate water quality monitoring equipment at the facility? (810.03)	Y	
C.	Is there an adequate means for determining chemical usage? (NA if no chemical addition) (811.40(1)(g))	N/A	
D.	Is the chemical storage adequately protected from contamination? (overlapping cover, sealed openings, made of appropriate material, etc.) (NA if no solution tank) (811.40)	N/A	
E.	Is the O & M of the treatment facility(ies) adequate? (NA if no treatment facility) (810.03)	N/A	

#	Question	Answer	Comments
F.	Is the condition of the treatment equipment satisfactory? (NA if no treatment, including emergency treatment) (810.03)	N/A	
G.	Is monitoring of treatment system performance adequate? (NA if no treatment) (810.03)	N/A	
H.	Are appropriate record keeping practices used? (NA if no treatment) (810.07)	N/A	
I.	Is the chemical(s) used in treatment NSF approved? (NA if no treatment) (810.09(1))	N/A	
J.	Are chemical storage/spill containment practices adequate? (NA if no treatment) (811.40(1)); (811.39(3))	N/A	
K.	Are chemical handling and spill response protocols adequate? (NA if no treatment) (811.40 (2) & (3))	N/A	
L.	Do operators have appropriate qualifications for the system treatment process(es)? (NA if no treatment) (810.04)	N/A	
M.	Are adequate security measures in place to prevent unauthorized access to treatment facility(ies)? (NA if no treatment) (810.23)	N/A	
N.	Is the treatment equipment reliable? (NA if no treatment)	N/A	
O.	Does the treatment process(es) adequately respond to changes in raw water quality? (NA if no treatment)	N/A	
P.	Are there sufficient fail-safes to ensure the continued operation of the treatment process(es)? (NA if no treatment) (811.39); (811.48(1)(c))	N/A	
Q.	Is the water system protected from accidental chemical overfeed? (anti-siphon device & power outlet linked with pump power) (NA if no chemical addition) (811.39)	N/A	
R.	Is the treatment system(s) protected from flooding? (NA if no treatment) (811.25(1)(d))	N/A	
S.	Does the installation of all water treatment devices meet the requirements of NR 811? (NA if no treatment) (811 Sub. VI & VII)	N/A	

#	Question	Answer	Comments
V.	Is the distribution system adequate? (NA if no distribution system)	Y	
A.	Is the system maintaining a minimum residual pressure > 20 psi at all points in the distribution system under all conditions of flow? (811.70(4))	Y	
B.	Are the disinfectant residuals adequate? (NA if no disinfection or no distribution system) (810.09); (811.42(5))	N/A	
C.	Is there an adequate corrosion control program? (NA if no dist. system or not required) (809.54(4))	N/A	
D.	Are all cross-connections to potential contamination sources eliminated? (810.15)	Y	
VI.	Is water system operations and management adequate?	Y	
A.	Are operators up to date with current standards, problem areas in the water system, current issues, new contaminants, regional source water problems, etc.?	Y	
B.	Is the system maintaining and practicing a comprehensive Emergency Operations Plan? (contacts, communications, mutual aid, auxiliary power procedures, loss of system pressure, emergency chlorination plan) (810.23(2))	Y	
C.	Have measures been taken to enhance the security of the water supply system? (Recommendations listed in security manual)	Y	
D.	Does the system have adequate manpower, training and equipment to perform all necessary duties to provide an adequate quantity of safe drinking water to consumers? (810.03)	Y	
E.	Have past inspection deficiencies, outlined in previous inspection reports, been corrected as required? (Review / initiate stepped enforcement process)	Y	
F.	Are customer complaints logged and responded to as necessary?	Y	
G.	Has the system always obtained approvals for improvements such as extensions or alterations which may affect water quality or quantity? (811.08)	Y	
H.	Has the system made an effort to stay in compliance with state regulations?	Y	

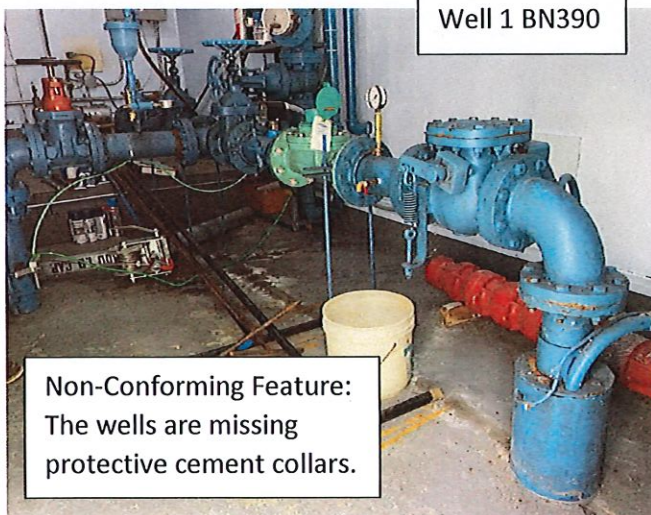
#	Question	Answer	Comments
I.	Does the system provide adequate operator support/training? (810.03)	Y	
J.	Does the system have any water management and conservation plan?	Y	
K.	Is there an appropriate priority list for addressing problems in the system?	Y	
L.	Are there adequate long- and short-term plans for system operation and maintenance? (810.13)	Y	
M.	Is there an adequate public notification plan? (809.950)	Y	
N.	Does the operator understand: Regulatory costs? Water system budget (annual budget)? Upgrade and maintenance costs for the next 3-5 years?	Y	
O.	Does the system have adequate revenue to meet regulatory requirements? 810.03	Y	
P.	Does the system have adequate revenue to cover emergency costs? 810.03	Y	
VII.	Is all monitoring/reporting/data verification adequate and accurate?	Y	
A.	Has the system been in compliance with their monitoring requirements with respect to samples taken and frequency?	Y	
B.	Are there updated monitoring plans on file with the department for bacteria (809.31(1)(a)), lead/copper ((809.547(1)(a)) and disinfection byproducts ((809.565(6)))?	Y	
C.	Does the system appropriately implement sampling plans in order to meet monitoring rule requirements? (sample sites spatially appropriate and rotate from site to site)	Y	
D.	Has the system been in general compliance with regards to water quality?	Y	
E.	Has water quality generally not degraded since the last sanitary survey?	Y	
F.	Has the system published adequate Consumer Confidence Report(s)? (809.833)	Y	

#	Question	Answer	Comments
G.	Are monthly operating reports complete and submitted in a timely manner (required for MC's, OTM's that have treatment or chemical addition, all hi-caps)? (810.07)	N/A	
H.	Have the appropriate public notices been issued in a timely manner (Tier 3 public notices may be published in the CCR per (809.950))?	Y	
I.	Does the monitoring data reported to the DNR match that on file in the system's records? (809.82)	Y	
J.	Are sampling faucets and faucet locations appropriate for each type of sample (including raw, entry point and distribution)? (811.37(5))	Y	
K.	Is the sampling procedure for each type of sample appropriate?	Y	
L.	Were there no recent water quality and/or quantity complaints from customers?	Y	
M.	Can the system chlorinate within 4 hours if there is a bacti unsafe?	Y	
VIII.	Has the operator(s) fulfilled certification requirements?	Y	
A.	Is the operator(s) certified with appropriate grade of certification? (NR 114 Subchapter I or III)	Y	
B.	Has the operator(s) fulfilled continuing education requirements? (NR 114 Subchapter I or III)	Y	
C.	Is the appropriate "operator-in-charge" assigned to the water system and on file with the DNR? (NR 114 Subchapter I or II)	Y	
D.	Is the operator(s) aware of renewal requirements and certification expiration date?	Y	
E.	Does the system provide for adequate operator support/training?	Y	



Recommendations:

- 1) The electrical conduit on Well 1 is loose. Please continue to monitor this and inspect or repair when well work is completed in the future.
- 2) Open, inspect, and clean the interior of the pressure tank.

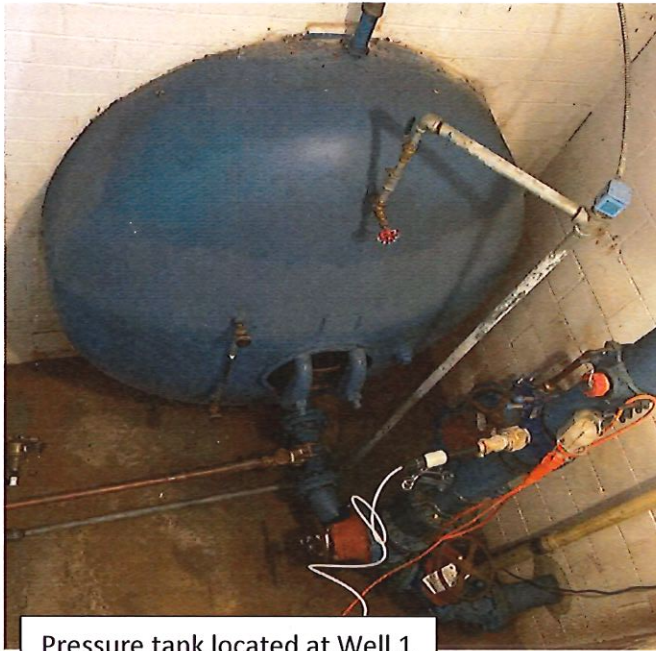


Well 1 BN390

Non-Conforming Feature:
The wells are missing protective cement collars.



Well 2 BN391



Pressure tank located at Well 1



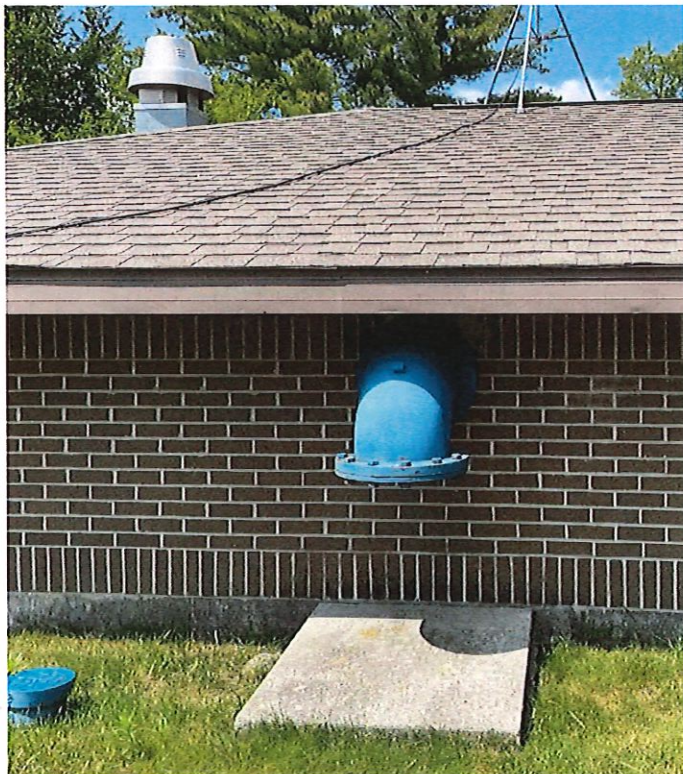
Pumping station at ground reservoir



Building housing pumping station, ground reservoir, and emergency generator



Pressure tank at Well 2
has not been in use



San Survey Pre-Survey Report - SADDLE RIDGE ESTATES (11101233) OC

Water System Summary Information

PWS ID	PWS Name	County	PWS Type	Trans/ (Non-Trans)	Popn	Svc	Connects	Owner Name	Owner Address	Owner Phone	Complete Date	ERP Updated	Emerg Phone
11101233	SADDLE RIDGE ESTATES	Columbia	OC	700	350	WINNIFRED SCHUMANN	PORTAGE, WI 53901	(608) 335-3465					

Certified Operators

Operator Name	License #	License Expire Date	Email Address	Phone #	Fax #	Address	Subclasses	OIC Role
Lynn Bradley	62290	5/1/2025	lbradley@generalengineering.net	(608)742-2169		916 SILVER LAKE DR PORTAGE, WI 53901	O - GENERAL OPERATION	N
Scott B Gorman	33564	5/1/2026	sgorman@poynette-wi.gov	(608)635-5120		W7187 PRICE RD POYNETTE, WI 53955	D1 - DISTRIBUTION GRADE 1, G1 - GROUNDWATER GRADE 1	Y

Affiliations

Name	Affiliation	Address	Email	Primary?
Paul Turner	CONTACT	100 SADDLE RIDGE PORTAGE WI 53901		Y
Tony Knipfer	DNR_REP	3911 FISH HATCHERY RD FITCHBURG WI 53711	anthony.knipfer@wisconsin.gov	Y

Name	Affiliation	Address	Email	Primary?
Lukasz Lyzwa, General Engineering Co	EMERGENCY	916 SILVER LAKE DR PO BOX 340 PORTAGE WI 53901	llyzwa@generalengineering.net	Y
Winnifred Schumann	OWNER	599 SADDLE RIDGE PORTAGE WI 53901	president@saddleridgeestates.net	Y
General Engineering Co -- Lynn Bradley	SAMPLER	615 N LYNNDALE DRIVE APPLETON WI 54914	Lynn@clse.pro	Y

Affiliation Phone

Name	Phone	Phone Type	Primary Phone?
General Engineering Co -- Lynn Bradley	(920) 731-4168	BUSINESS	Y
General Engineering Co -- Lynn Bradley	(920) 381-4979	CELLULAR	N
Lukasz Lyzwa, General Engineering Co	(608) 742-2169	BUSINESS	Y
Lukasz Lyzwa, General Engineering Co	(608) 697-5452	CELLULAR	N
Lukasz Lyzwa, General Engineering Co	(608) 742-2592	FAX	N
Paul Turner	(608) 742-0391	HOME	Y
Paul Turner	(608) 692-5773	CELLULAR	N
Tony Knipfer	(608) 228-6227	CELLULAR	Y
Tony Knipfer	(608) 275-3461	BUSINESS	N
Tony Knipfer	(608) 275-3338	FAX	N
Winnifred Schumann	(608) 335-3465	CELLULAR	Y

Entry Points and Sources

Source ID	Source Name	WUWN	Status	Available Desc	Type	Water Source	Depth (ft)	Cased (ft)	Grouted (ft)
1	Well #1	BN390	Active	Permanent	SOURCE OF WATER	Groundwater	382	360	360

Source ID	Source Name	WUWN	Status	Available Desc	Type	Water Source	Depth (ft)	Cased (ft)	Grouted (ft)
2	Well #2	BN391	Active	Permanent	SOURCE OF WATER	Groundwater	333	299	299
200			Active	Permanent	ENTRY POINT	GW entry point			

Entry Points and Sources - Additional Information

Source ID	Well Constr	Case	Case Height (ft)	Case Size (in)	Cap Seal Type	Variance?	Reason	Abn Approval	Original Constr Yr	Prev WUWN
1	8/2/1978		11.5	8	FULL_SANITARY					
2	8/12/1979		16	8	FULL_SANITARY					

Entry Points and Sources - Pump Information

Source ID	Pump Type	Pump Make	Pump HP	Capacity (gpm)	Discharge Type	Pump Last Pulled Date	Aux Power?
1	SUBMERSIBLE			235	ABOVE_GROUND		Y
2	SUBMERSIBLE			300	ABOVE_GROUND		Y
200							

Storage

ID	Status	Desc	Sub Type	Volume (gal)	Pump Cap (gpm)	Firm	MSL	Overflow to Ground (ft)	Overflow Elevation (ft)	Aux Power?	Manufacturer Model	Chem Inject Capable?	Active Date
C1	Active	Ground Reservoir	GROUND STORAGE	48000	235					Yes			1/1/1960
C2	Active	Buried at Wellhouse	PRESSURE TANK	2400						Yes			1/1/1960

Storage - Additional Information

ID	Interior Last Painted	Exterior Last Painted	Interior Last Inspected	Inspect Type
C1			05/19/2020	
C2				

Booster Stations

ID	Component Description	Component Sub Type	Status	Firm Pump Capacity (gpm)	Aux Power?	Storage?	Chemical Addition?	Active Date
----	-----------------------	--------------------	--------	--------------------------	------------	----------	--------------------	-------------

System Interconnects

ID	Component Description	Component Sub Type	Status	Capacity (gal)	Metered?	Chemical Injection Capable?	Active Date
----	-----------------------	--------------------	--------	----------------	----------	-----------------------------	-------------

Treatment

ID	Treatment	Objective	Begin Date	Pump Model	Capacity (gpm)	Stroke %	Speed %	Tank Cap (gal)	Dilution Ratio
1	None	N - No Treatment at Source	1/1/1960						
2	None	N - No Treatment at Source	1/1/1960						
200	None	N - No Treatment at Source	1/1/1960						

System Evaluation Summary

Inspector/Reviewer	Date	Report Date	Type	Agency	Response Due	Response Rec'd
KNIPFER, TONY	7/18/2023		SURVEY	DNR		
KNIPFER, TONY	7/23/2020	7/27/2020	SURVEY	DNR		

Bacteriological Sampling History

Year	Distribution		Confirmed Unsafe	Triggered		Missed Samples	Raw Water		Raw Water Unsafe	Fecal Positive?
	Safe	Unsafe		Unsafe	Safe		Safe	Unsafe		
2023	7									N
2022	11	1								N
2021	12									N
2020	12									N
2019	11	1		1		1				N
2018	12									N

Chemical Sampling History

Year	Sample Group Code	Source ID	Samples Taken	Missed Samples	MCL Violations
2022	NITRATE	200	1		
2021	IOC	200	1		
2021	PBCU		10		
2021	RAD	200	2		
2021	VOC	200	1		
2020	NITRATE	200	1		
2019	NITRATE	200	1		
2018	IOC	200	1		
2018	PBCU		10		
2018	RAD	200	1		
2018	SOC	200	1		
2018	VOC	200	1		

Sample Group **Last Sampled**

BACTI	2023
IOC	2021
NITRATE	2022
PBCU	2021
PFAS	2023
RAD	2021
SOC	2018
VOC	2021

Bacti MCL Violations

Source ID	Violation Code	Violation Start Date	Violation End Date
-----------	----------------	----------------------	--------------------

Chemical MCL Violations

Source ID	Contaminant	Contam Description	MCL	Units	Violation Start	Violation End	Continuing Operation?
-----------	-------------	--------------------	-----	-------	-----------------	---------------	-----------------------

Deficiencies From Last Survey

Severity	Description	Code Citation	Compliance Due	Compliance Achieved	Actions Taken	Observations	Location
----------	-------------	---------------	----------------	---------------------	---------------	--------------	----------

Q582site_plan_grp
07/06/2023

**Wisconsin Department of Natural Resources
Drinking Water System
Monitoring Site Plan Grouped by Usage**

**SADDLE RIDGE ESTATES 11101233
KNIPFER, TONY**

Type: OC Status: A Columbia County South Central Region

Usage: Bacti - Total Coliform Raw Water and Groundwater Triggered/Repeat						
<u>ID</u>	<u>Location_Address</u>	<u>Location_Description</u>	<u>Sample_Source</u>	<u>EP ID</u>	<u>Usage_Details</u>	<u>SWSZ</u>
W1	100 SADDLE RIDGE	WELL #1	Well	1		08/02/1978
W2	100 SADDLE RIDGE	WELL #2	Well	2		08/12/1979

Usage: Bacti - Total Coliform Rule Compliance						
<u>ID</u>	<u>Location_Address</u>	<u>Location_Description</u>	<u>Sample_Source</u>	<u>EP ID</u>	<u>Usage_Details</u>	<u>SWSZ</u>
D1	113 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys			01/01/1960
D10	888 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys			01/01/1960
D11	926 SADDLE RIDGE	KITCHEN	Dist Sys			01/01/1960
D12	6024 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys			01/01/1960
D13	6005 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys			10/27/2017
D14	912 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys			10/27/2017
D15	1044 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys			10/27/2017
D2	202 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys			01/01/1960
D3	212 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys			01/01/1960
D4	213 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys			01/01/1960
D5	312 SADDLE RIDGE	BASEMENT BAR	Dist Sys			01/01/1960
D6	313 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys			01/01/1960
D7	409 SADDLE RIDGE	BASEMENT RESTROOM	Dist Sys			01/01/1960
D8	668 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys			01/01/1960
D9	783 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys			01/01/1960

Usage: Inorganics EP Compliance						
<u>ID</u>	<u>Location_Address</u>	<u>Location_Description</u>	<u>Sample_Source</u>	<u>EP ID</u>	<u>Usage_Details</u>	<u>SWSZ</u>
E1	100 SADDLE RIDGE	LARGE STORAGE RESERVOIR	Entry Pt	200		08/02/1978

Usage: Inorganics Raw Compliance						
<u>ID</u>	<u>Location_Address</u>	<u>Location_Description</u>	<u>Sample_Source</u>	<u>EP ID</u>	<u>Usage_Details</u>	<u>SWSZ</u>
W1	100 SADDLE RIDGE	WELL #1	Well	1		08/02/1978
W2	100 SADDLE RIDGE	WELL #2	Well	2		08/12/1979

**Wisconsin Department of Natural Resources
Drinking Water System
Monitoring Site Plan Grouped by Usage**

**SADDLE RIDGE ESTATES 11101233
KNIPFER, TONY**

Type: OC Status: A Columbia County South Central Region

Usage: Lead and Copper Rule Compliance

<u>ID</u>	<u>Location Address</u>	<u>Location Description</u>	<u>Sample Source</u>	<u>EP ID</u>	<u>Usage Details</u>	<u>Start Date</u>	<u>End Date</u>	<u>SWSZ</u>
D1	113 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys		PBCU_EXCEPT	01/01/1960		
D10	888 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys		PBCU_EXCEPT	01/01/1960		
D11	926 SADDLE RIDGE	KITCHEN	Dist Sys		PBCU_EXCEPT	01/01/1960		
D12	6024 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys		PBCU_EXCEPT	01/01/1960	09/30/2021	
D13	6005 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys		PBCU_EXCEPT	10/27/2017		
D16	502 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys		PBCU_EXCEPT	10/27/2017		
D17	6017 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys		PBCU_EXCEPT	01/01/2021		
D18	793 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys		PBCU_EXCEPT	01/01/2021		
D2	202 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys		PBCU_EXCEPT	01/01/1960		
D3	212 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys		PBCU_EXCEPT	01/01/1960		
D4	213 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys		PBCU_EXCEPT	01/01/1960		
D5	312 SADDLE RIDGE	BASEMENT BAR	Dist Sys		PBCU_EXCEPT	01/01/1960		
D6	313 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys		PBCU_EXCEPT	01/01/1960		
D7	409 SADDLE RIDGE	BASEMENT RESTROOM	Dist Sys		PBCU_EXCEPT	01/01/1960		
D8	668 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys		PBCU_EXCEPT	01/01/1960		
D9	783 SADDLE RIDGE	MAIN FLOOR RESTROOM	Dist Sys		PBCU_EXCEPT	01/01/1960		

Usage: Radionuclides EP Compliance

<u>ID</u>	<u>Location Address</u>	<u>Location Description</u>	<u>Sample Source</u>	<u>EP ID</u>	<u>Usage Details</u>	<u>Start Date</u>	<u>End Date</u>	<u>SWSZ</u>
E1	100 SADDLE RIDGE	LARGE STORAGE RESERVOIR	Entry Pt	200		08/02/1978		

Usage: Radionuclides Raw Compliance

<u>ID</u>	<u>Location Address</u>	<u>Location Description</u>	<u>Sample Source</u>	<u>EP ID</u>	<u>Usage Details</u>	<u>Start Date</u>	<u>End Date</u>	<u>SWSZ</u>
W1	100 SADDLE RIDGE	WELL #1	Well	1		08/02/1978		
W2	100 SADDLE RIDGE	WELL #2	Well	2		08/12/1979		

Usage: Synthetic Organics EP Compliance

<u>ID</u>	<u>Location Address</u>	<u>Location Description</u>	<u>Sample Source</u>	<u>EP ID</u>	<u>Usage Details</u>	<u>Start Date</u>	<u>End Date</u>	<u>SWSZ</u>
E1	100 SADDLE RIDGE	LARGE STORAGE RESERVOIR	Entry Pt	200		01/01/1960		

**Wisconsin Department of Natural Resources
Drinking Water System
Monitoring Site Plan Grouped by Usage**

**SADDLE RIDGE ESTATES 11101233
KNIPFER, TONY**

Type: OC Status: A Columbia County South Central Region

Usage: Synthetic Organics Raw Compliance		Location Address	Location Description	Sample Source	EP ID	Usage Details	Start Date	End Date	SWSZ
W1		100 SADDLE RIDGE	WELL #1	Well	1		08/02/1978		
W2		100 SADDLE RIDGE	WELL #2	Well	2		08/12/1979		

Usage: Volatile Organics EP Compliance		Location Address	Location Description	Sample Source	EP ID	Usage Details	Start Date	End Date	SWSZ
E1		100 SADDLE RIDGE	LARGE STORAGE RESERVOIR	Entry Pt	200		01/01/1960		

Usage: Volatile Organics Raw Compliance		Location Address	Location Description	Sample Source	EP ID	Usage Details	Start Date	End Date	SWSZ
W1		100 SADDLE RIDGE	WELL #1	Well	1		08/02/1978		
W2		100 SADDLE RIDGE	WELL #2	Well	2		08/12/1979		

Well 1

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				BN390		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A	
Property Owner SADDLE RIDGE ESTATES				Phone #		1. Well Location				Fire # (if avail.)	
Mailing Address 104 SADDLE RD						Town of PACIFIC					
City PORTAGE		State WI	Zip Code 53901								
County Columbia	Co. Permit #	Notification #		Completed 08-02-1978		Subdivision Name			Lot #	Block #	
Well Constructor (Business Name) SAM VANDER GALIEN JR			Lic. # 420	Facility ID # (Public Wells) 111012330						Method Code GPS008	
Address PO BOX 150 RANDOLPH WI 53956-0150			Well Plan Approval #			or Govt Lot #	Section 1	Township 12 N	Range 9 E		
Hicap Permanent Well #	Common Well #		Specific Capacity 9.5			2. Well Type New Well					
3. Well serves # of			Hicap Well ? No			of previous unique well # constructed in					
Other than Municipal/Community			Hicap Property ? No			Reason for replaced or reconstructed well ?					
Heat Exchange ___ # of drillholes			Hicap Potable ?			Construction Type Drilled					
4. Potential Contamination Sources - ON REVERSE SIDE											
5. Drillhole Dimensions and Construction Method						8. Geology					
Dia. (in.)	From (ft.)	To (ft.)	Upper Enlarged Drillhole		Lower Open Bedrock	Geology Codes	8. Geology Type, Caving/Noncaving, Color, Hardness, etc...			From (ft.)	To (ft.)
13	Surface	360	Yes Rotary - Mud Circulation		No	C S	SANDY CLAY			Surface	8
8	360	382	No Rotary - Air		No	S	SAND			8	43
			No Rotary - Air & Foam		No	C	CLAY			43	190
			No Drill-Through Casing Hammer			S	SAND			190	260
			No Reverse Rotary			G	GRAVEL			260	382
			No Cable-tool Bit ___ in. dia...		No						
			Dual Rotary								
			No Temp. Outer Casing ___ in. dia								
			No Removed? ___ depth ft. (If NO explain on back side)								
6. Casing, Liner, Screen						9. Static Water Level			11. Well Is		
Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly			From (ft.)	To (ft.)	23 ft. below ground surface			12 in. above grade		
8	STD BLK PIPE			Surface	360	10. Pump Test			Developed ? No		
Dia. (in.)	Screen type, material & slot size			From (ft.)	To (ft.)	Pumping level 43 ft. below surface			Disinfected ? Yes		
						Pumping at 190 GP for 6 Hrs.			Capped ? Yes		
						Pumping Method ?					
7. Grout or Other Sealing Material						12. Notified Owner of need to fill & seal ?					
Method						Filled & Sealed Well(s) as needed? No					
Kind of Sealing Material		From (ft.)	To (ft.)	# Sacks Cement							
CEMENT		Surface	60								
MUD & CUTTINGS		60	360								
13. Constructor / Supervisory Driller						Lic #		Date Signed			
SV								08-02-1978			
Drill Rig Operator						Lic or Reg #		Date Signed			

4a. Potential Contamination Sources

Is the well located in floodplain ? No

Comment:

Water Quality Text:

Water Quantity Text:

Difficulty Text:

Created On: 02-25-2002

Created by: COLLEN

Updated On: 04-19-2013

Updated by: PWS TRANSFER

Well 2

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				BN391		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A							
Property Owner SWAN LAKE CONSTRUCTION				Phone #		1. Well Location				Fire # (if avail.)							
Mailing Address 104 SADDLE RD						Town of PACIFIC											
City PORTAGE		State WI		Zip Code 53901													
County Columbia		Co. Permit #		Notification #		Completed 08-12-1979		Subdivision Name		Lot #	Block #						
Well Constructor (Business Name) SAM VANDER GALIEN JR			Lic. # 420	Facility ID # (Public Wells) 111012330					Method Code GPS008								
Address PO BOX 150 RANDOLPH WI 53956-0150			Well Plan Approval # 11/2/0001		Approval Date (mm-dd-yyyy) 01-01-1960	or Govt Lot #	Section 1	Township 12 N	Range 9 E								
Hicap Permanent Well # 68979		Common Well # 002		Specific Capacity 12.9		2. Well Type New Well				of previous unique well # constructed in							
3. Well serves # of Other than Municipal/Community				Hicap Well ? No		Reason for replaced or reconstructed well ?											
Heat Exchange ___ # of drillholes				Hicap Property ? No		Construction Type Drilled											
4. Potential Contamination Sources - ON REVERSE SIDE																	
5. Drillhole Dimensions and Construction Method						8. Geology											
Dia. (in.)		From (ft.)		To (ft.)		Upper Enlarged Drillhole		Lower Open Bedrock		Geology Codes		8. Geology Type, Caving/Noncaving, Color, Hardness, etc...		From (ft.)		To (ft.)	
13		Surface		299		Yes Rotary - Mud Circulation		No		S		SAND		Surface		5	
10		299		333		No Rotary - Air		No		S C		SAND + CLAY		5		10	
						No Rotary - Air & Foam		No		S G		SAND + GRAVEL		10		50	
						No Drill-Through Casing Hammer				C		CLAY		50		70	
						No Reverse Rotary				N S		SAND (FINE)		70		180	
						No Cable-tool Bit ___ in. dia...		No		S		MUCKY SAND		180		230	
						No Dual Rotary				S G		SANDY GRAVEL		230		333	
						No Temp. Outer Casing ___ in. dia											
						No Removed? ___ depth ft. (If NO explain on back side)											
6. Casing, Liner, Screen						9. Static Water Level				11. Well Is							
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly			From (ft.)		To (ft.)		30 ft. below ground surface		24 in. above grade						
8		STD BLK PIPE			Surface		299		10. Pump Test		Developed ? No						
Dia. (in.)		Screen type, material & slot size			From (ft.)		To (ft.)		Pumping level 65 ft. below surface		Disinfected ? Yes						
		45 SLOT SCREEN INSTALLED 40FT, 6 INCH INSIDE CASING			293		333		Pumping at 450 GP for 3 Hrs.		Capped ? Yes						
									Pumping Method ?								
7. Grout or Other Sealing Material						12. Notified Owner of need to fill & seal ?											
Method						Filled & Sealed Well(s) as needed? No											
Kind of Sealing Material		From (ft.)		To (ft.)		# Sacks Cement											
CEMENT		Surface		80													
DRILLING MUD		80		299													
						13. Constructor / Supervisory Driller		Lic #		Date Signed							
						SV				08-12-1979							
						Drill Rig Operator		Lic or Reg #		Date Signed							

4a. Potential Contamination Sources

Is the well located in floodplain ? No

Comment:

Water Quality Text:

Water Quantity Text:

Difficulty Text:

Created On: 02-25-2002

Created by: COLLEN

Updated On: 04-19-2013

Updated by: PWS TRANSFER