



Welcome to Online Well Construction Reporting

A WAMS ID is needed for login. This is the same login used for Well Fill & Seal reporting.

To sign up: <https://dnr.wi.gov/topic/switchboard/>

WCR Link: <https://dnrx.wisconsin.gov/wellconstructionext/>

WAR Link: <https://apps.dnr.wi.gov/warspub/Report>

Tips for completing reports

- License numbers must be 4 digits. Use leading zero(s) as needed.
- When entering values less than one, use a zero in front of a decimal point. *Example: ¾ = 0.75*
- Coordinates must be in decimal degrees (DD.DDDD). Round to only 4 decimal places.

Action Buttons (report list screen):



Open Entry Screen

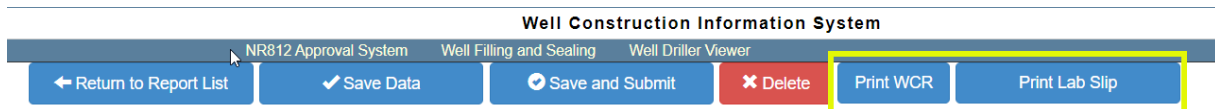


Opens printable WCR (PDF file)



Print First Water Quality Test lab slip

The required fields for saving a WCR are denoted by a red asterisk.



*After saving, use "Print Lab Slip" to get a First Water Quality Test slip.
Use "Print WCR" to create a printable copy of your WCR.*

It is recommended to save often to avoid losing work.

Completing the Demographic Section

Well Construction Report

WUWN: * Generate WUWN

Owner: * Phone:

Address: *

City: * State: * Zip: * Well Notification#: ?

Well Completion Date:

License#: Q Search Constructor: *

Address:

City: State: Zip:

Click “Generate WUWN” to assign a WUWN.

Well Construction Report

WUWN: * ? Generate WUWN

Enter the property owner’s name (Last, First), mailing address, and phone number.

Type or copy/paste the Well Notification from your receipt into the report.

A Well Notification is not required in all situations.

If well has been completed at the time of entry, enter the completion date into the report.

Type the license number into the License# field and click the “Search” button.

The system will auto-fill the driller information based on licensing records.

The remaining fields in the Demographics section are only required when applicable to the well being reported.

Date Received fields will be automatically filled by system when report is submitted to DNR.

HiCap Number: Common Well No: Common Name:

Public Facility ID: Approval No: ? Approval Date:

Date Received 1: Date Received 2: Date Received 3:

Completing Well Location (Section 1)

1. Well Location

County: * County Well Permit No: ?

City/Village/Town: of

Fire No: Well Address:

Subdiv: Lot #: Block #:

Gov Lot#: Latitude: ? Longitude:

Method: ?

QQ Sect: Q Sect: Section: Township: Range:

Select the County from the drop down.

If located within a delegated county, complete the County Well Permit No field.

Select the appropriate options from the City/Village/Town drop downs.

Complete the Fire No, Well Address, Subdivision, Lot #, Block #, and Gov Lot # fields with as much information as you have.

Enter the Latitude and Longitude to the 4th decimal place and select the method of collection from the Method drop down.

Enter the PLSS information into the corresponding fields.

If an error occurs, use the Well Driller Viewer to verify your County, Coordinates, and PLSS match.

Completing Well Type and Service Type (Section 2 and 3)

2. Well Type

Previous WUWN:

Year Original Constructed:

Reason for replacement/reconstruction:

Construction Method:

Other:

3. Service Type

Service Category:

i

services: Serves:

High capacity well

High capacity property

High capacity potable

If Heat Exchange, number of drillholes:

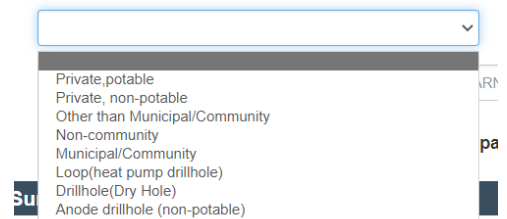
Select the appropriate well type (New, Reconstruction, or Replacement) from the drop down.
Be sure to enter the reason for any Replacement or Reconstructions.
If the previous WUWN is known, complete this field.

Select the most appropriate Service Category from the drop down.

Enter the number of service connections and what the well serves.

If the well is a High Capacity well or is located on a High Capacity property, check the appropriate box(es).

For Heat Exchange projects, enter the number of drillholes in the indicated field.



Completing Well Location and Surroundings (Section 4)

4. Well Location and Surroundings

Located in Floodplain
 Indicate Distances from Potential Contamination Sources +

Category	Type	Qual	Distance	Additional Information	Delete
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	✖

List all nearby potential contamination sources on the report.

Click the plus sign to add a line for each potential contamination source on the property.

Select the source from the Category drop down.

“Required” will appear in red text below the Type drop down when additional information is needed.

Enter the distance and any additional information in the indicated fields.

Use the Qual field to indicate greater than (>) when appropriate.

Completing Drillhole Dimensions and Construction Method (Section 5)

5. Drillhole Dimensions and Construction Method				
+	Dia (in.)	From(ft)	To(ft)	Del
Upper Enlarged Drillhole		Lower Open Bedrock		
<input type="checkbox"/>	..Rotary-Mud Circulation.....	<input type="checkbox"/>		
<input type="checkbox"/>	..Rotary-Air.....	<input type="checkbox"/>		
<input type="checkbox"/>	..Rotary-Air-Foam.....	<input type="checkbox"/>	NA	
<input type="checkbox"/>	..Drill-through Casing Hammer	<input type="checkbox"/>	NA	
<input type="checkbox"/>	..Reverse Rotary	<input type="checkbox"/>		
<input type="checkbox"/>	Cable Tool Bit	<input type="text"/>	in.dia....	<input type="checkbox"/>
<input type="checkbox"/>	..Dual Rotary.....	Describe: <input type="text"/>		
<input type="checkbox"/>	Other	Describe: <input type="text"/>		
<input type="checkbox"/>	Temp Outer Casing	Dia(In): <input type="text"/>	Depth: <input type="text"/>	<input type="checkbox"/> Removed
Explain:		<input type="text"/>		

Click the plus sign to add a line for each portion of the drillhole.

Enter the diameter(s) and depth(s) for the drillhole.

Select the drilling method for the Upper Enlarged Drillhole and Lower Open Bedrock when appropriate.

If a temporary casing was used, enter the diameter and depth.

Check the Removed box to indicate the casing was removed.

If the casing was not removed, add explanation in Explain field.

Completing Casing, Liner, Screen (Section 6)

6. Casing, Liner, Screen					
+	Dia (in)	Material, Weight, Specification, Mfg. & Method of Assembly	From(ft)	To(ft)	Delete
Dia (in)	Screen type and Material	From(ft)	To(ft)		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		

Click the plus sign to add a line for each diameter of casing or liner installed.

Enter the inner casing diameter, material, weight, specification, manufacturer, method of assembly and depths for all casings or liners installed.

Enter the inner diameter, screen type, screen material, and depths for the screen.

Completing Grout or Other Sealing Material (Section 7)

7. Grout or Other Sealing Material

Method:

Kind of Sealing Material	From(ft)	To(ft)	# of	Units	Delete

Enter the placement method by typing or selecting from the drop down.

Click the plus sign to add a line for each grout material used.

Enter the grout material by typing or selecting from the drop down.

Method:

BRADENHEAD

GROUT (FLOAT) SHOE

GROUT DISPLACEMENT (PLUG)

8. Geology HALLIBURTON (DOUBLE PLUG)

HALLIBURTON (SINGLE PLUG)

1 2 MOUNDED

STREET ELBOW

9. Static Water TREMIE PIPE - GRAVITY

TREMIE PIPE - PUMPED

Kind of Sealing Material

DRILLING MUD & CUTTINGS

GRANULAR BENTONITE

NEAT CEMENT GROUT

SAND CEMENT

Enter the depths, amount, and units.

Completing Geology (Section 8)

8. Geology

1	2	3	4	Type,Caving/Noncaving,Color,Hardness, Etc.	From(ft)	To(ft)	Del

Click the plus sign to add lines for each of the geologies encountered during drilling.

Select the appropriate geology descriptors from the drop downs in columns 1 through 4 to describe the geology encountered.

Column 3 is required for each line of geology.

Columns 1, 2, and 4 are optional and should be used to further describe the geology.

1

K-Black

U-Blue

G-Gray

E-Green

O-Orange

P-Pink

R-Red

T-Tan/Brown

I-White

Y-Yellow

2

B-Broken

C-Cavernous

O-Caving

E-Clean

A-Coarse

D-Decomposed/Weathered

N-Fine

L-Fossiliferous

F-Fractured

H-Hard/Firm

J-Iron

X-Lensed/Streaked/Layered

M-Medium

V-Non-Caving

S-Soft/Loose

W-Water Bearing

3

V-Alluvium

B-Basalt or Trap Rock

C-Clay

Z-Clay & Gravel

K-Cobbles/Boulders

A-Conglomerate

J-Crystalline

D-Drift

W-Existing

F-Fill

Q-Granite

G-Gravel/Stones

P-Hardpan

L-Limestone/Dolomite

U-Mud or Muck

O-Outwash

E-Peat

R-Quartzite

S-Sand

Y-Sand & Gravel

X-Sand & Clay

N-Sandstone

H-Shale

F-Fill

M-Silt

I-Soil-Organic

T-Till

4

V-Alluvial

B-Basalt or Trap Rock

C-Clayey

L-Limey or Dolomitic

U-Muddy or Murky

S-Sandy

H-Shaley

M-Silty

K-w/Broken Rock

R-w/Chert

N-Sandstone

Z-w/Cobbles/Boulders

A-w/Conglomerates

J-w/Crystalline

F-w/Fill

D-w/Glacial Material

Q-w/Granite

G-w/Gravel/Stones

P-w/Hardpan

O-w/Outwash

N-w/Sandstone

I-w/Soil-Organic

T-w/Till

W-w/Wood

Completing Static Water Level, Pump Test, and Well Is (Sections 9, 10, 11)

9. Static Water Level	10. Pump Test	11. Well Is
Level (ft): <input type="text"/>	Level (ft): <input type="text"/>	Level (in): <input type="text"/>
Above/Below Ground: <input type="text"/>	Pumping Amount: <input type="text"/>	Above/Below Ground: <input type="text"/>
Specific Capacity: <input type="text" value="CALCULATED"/>	Units(gpm if blank): <input type="text" value="v"/>	<input type="checkbox"/> Developed
	Hours: <input type="text"/>	<input type="checkbox"/> Disinfected
	Method: <input type="text" value="v"/>	<input type="checkbox"/> Capped

Enter the Static Water level and indicate above/below ground.

Enter the pump test information. Select the units and method of test pumping from the drop downs.

Enter the casing height in inches and indicate above/below ground.

Check boxes to indicate completion of well development, disinfection, and capping.

Completion of Filling and Sealing (Section 12)

12. Filling and Sealing	
<input type="checkbox"/> Notified Owner of need to fill & seal	Explanation: <input type="text" value="ONLY REQUIRED IF THE WELL IS REPLACEMENT WELL – EXPLAIN IF NO"/>
<input type="checkbox"/> Filled & Sealed well(s) as needed	Explanation: <input type="text" value="ONLY REQUIRED IF THE WELL IS REPLACEMENT WELL – EXPLAIN IF NO"/>

Required section for all replacement wells.

Check the boxes to indicate if the steps were taken.
If a step was not taken, an explanation is required.

Completing Additional Information (Section 13)

13. Additional Information			
Contractor Initials:	<input type="text"/>	License#:	<input type="text"/>
		Date:	<input type="text" value="MM/DD/YYYY"/>
Rig Operator Initials:	<input type="text"/>	Registration#:	<input type="text"/>
		Date:	<input type="text" value="MM/DD/YYYY"/>


Enter initials and 4-digit individual license number(s) for the Rig Operator and Licensed Well Driller. **This is considered their signatures.**

If Rig Operator is not registered or is a licensed well driller, do not enter a license number.

Use the Comments field to enter any additional information about the well.
Examples: problematic drilling, grouting issues, hole collapse, etc.

Comments:

To record a variance, click the plus sign above Variance ID.

Variance ID 	Variance or Exception Type	Date	Reason	Delete
<input type="text"/>	<input type="text"/>	MM/DD/YYYY	<input type="text"/>	

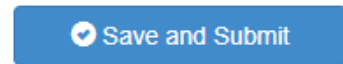
Enter the Variance ID and the reason.

To record Hydrofracturing, click the plus sign above Rehab Type.

Rehab Type	Completed	Result	Delete
<input type="text"/>	MM/DD/YYYY	KEY YIELD BEFORE =	

Select Hydrofracture from the drop down, enter the date, and well yield before.

Click “Save and Submit” to send your WCR to DNR for review.



Your report may be flagged with errors. You should correct errors in fields for information known to you. For errors you are unable to correct, check “Ignore all error and submit to DNR” and click “Save and Submit” again.

Ignore all error and submit to DNR.
Please fix the error and try again.

Contact us

For technical assistance:

DNRDGPrivateWaterWebSupport@wisconsin.gov

For assistance completing reports:

DNRWELLREPORT@wisconsin.gov