7600

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DRINKING WATER/GW

Prop. 14262

(2)

Return completed forms to:
Wisconsin Department of Natural Resources
Bureau of Drinking Water & Groundwater – DG/5
PO Box 7921, Madison, WI 53707-7921
dnr.wi.gov

High Capacity, School or Wastewater Treatment Plant Well Approval Request

Form 3300-295 (R 5/15)

Notice: Pursuant to §§ NR 812.09(4)(a) & (b), Wis. Adm. Code, prior Department of Natural Resources (DNR) approval is required for the construction, reconstruction or operation of a high capacity well or system of high capacity wells, a school well or a wastewater treatment plan well. This form is required to be completed to request approval for installation of a well or wells on a high capacity property, to modify a well on a high capacity property, or the construction or reconstruction of a school or wastewater treatment plant well. Personally identifiable information collected will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Open Records law (s.19.31-19.39, Wis. Stats.).

Applicant Information

Name and Title		Company		
JEFF KRAMER / HYDROGEOLOGIST		SAM'S WELL DRILLING		
Street Address		**City**	**State**	**ZIP Code**
P.O. BOX 150		RANDOLPH	WI	53956
Phone Number (include area code)	**Fax Number**	**Email Address**		
920-326-5193	920-326-5209	JEFFK@SAMSWELLDRILLING.COM		

Owner Information (if different than applicant)

Name and Title		Company		
DONALD AND JAMES BORDE / OWNERS		BUSY B'S FARMS		
Street Address		**City**	**State**	**ZIP Code**
N2252 OLD HIGHWAY F ROAD		RIO	WI	53960
Phone Number (include area code)	**Fax Number**	**Email Address**		
608-438-8460		BUSYBSDONALD@GMAIL.COM		

Operator Information (if different than owner)

Name and Title		Company		
DONALD AND JAMES BORDE / OWNERS		BUSY B'S FARMS		
Street Address		**City**	**State**	**ZIP Code**
N2252 OLD HIGHWAY F ROAD		RIO	WI	53960
Phone Number (include area code)	**Fax Number**	**Email Address**		
608-438-8460		BUSYBSDONALD@GMAIL.COM		

Submittal Purpose

Check all that apply

- [X] **Non-Potable Well(s)**
- [ ] **Potable Well(s) Requires Potable Attachments**
- [X] Install one or more new wells with a capacity greater than 70 gallons per minute.
- [ ] Install one or more new wells with a capacity less than 70 gallons per minute on a high capacity property.
- [ ] Replace one or more wells with a capacity greater than 70 gallons per minute.
- [ ] Replace one or more wells with a capacity less than 70 gallons per minute on a high capacity property.
- [ ] Reconstruct one or more wells with a capacity greater than 70 gallons per minute.
- [ ] Reconstruct one or more wells with a capacity less than 70 gallons per minute on a high capacity property.
- [ ] Increase pumping rate in one or more wells to a rate greater than previously approved.
- [ ] Renew a previous approval that has expired.
- [ ] Other (please describe: School, WWTP etc.) _____

Project Description

Provide a brief description of the proposed project including the number of potable wells to be installed. For non-potable wells include number of acres and expected crop rotation for agricultural irrigation wells. For potable wells serving livestock note if the facility is currently or plans to become a concentrated animal feeding operation (CAFO).

1.) NUMBER OF ACRES - 379 ACRES
2.) CROP ROTATION - CORN, SOYBEANS, ALFALFA.

Required Enclosures

- [X] High Capacity Well Application (Form 3300-295)
- [X] $500 application fee (see s. 281.34 (2), Wis. Stats.)
- [X] Well Construction Reports (if available) for existing wells
- [ ] Potable Attachment: if a proposed well is potable (Form 3300-295A)
- [X] Aerial or Plat Map with property boundaries outlined
- [ ] Variance Request, if needed (Form 3300-210)

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Bureau of Drinking Water & Groundwater -- DG/5
PO Box 7921, Madison, WI 53707-7921
dnr.wi.gov

High Capacity, School or Wastewater Treatment Plant Well Approval Request

Form 3300-295 (R 5/15)

This form is used to request an approval for the construction or reconstruction of a well or wells on a high capacity property, to modify an existing well on a high capacity property, or the construction or reconstruction of a school or wastewater treatment plant well. The following information will be scanned and posted as a public record on our website. Return completed application to:

Wisconsin Department of Natural Resources
Bureau of Drinking Water & Groundwater - DG/5
PO Box 7921
Madison, WI 53707-7921

Applicant Information

Name and Title	Company
JEFF KRAMER / HYDROGEOLOGIST	SAMS WELL DRILLING

Owner Information

Name and Title	Company
DONALD AND JAMES BARDE / OWNERS	BUSH B FARMS

County	Town	Range		Section	High Capacity Well File No. (if applicable)
COLUMBIA	10 N	11	● East ○ West	9	NA

Yes No

○ ● Is a proposed well within 1,200 feet of a landfill? Landfill location: (Township/Range/Section): T R S

○ ● Are you aware of any existing well installations on the high capacity property that are out of compliance with Chapter NR 812, Wisconsin Administrative Code? If yes, attach a description of the non-complying wells.

Existing Well Information

Enter the following information for all **existing** wells on the property and any contiguous property owned by the applicant.
Note: Applications are not complete unless they specify water use, pump capacities and GPS locations of existing wells.

Well Name and/or Number assigned by Owner	Water Use Code(s)	High Capacity Well Number	Pump Capacity (gpm)	Existing Well Coordinates Decimal Degrees Preferred (e.g. 45.1234, -89.1234) Latitude	Longitude	WUWN or WCR Image File # (if known)
92027 MAIN FARM	LW10	NA	30	43.347788	89.196231	NA NW SE S.9
92026 BROTHER 3 FARM	DS11	NA	20	43.348562	89.191572	NR676 SE NE S.9

Additional Project Information

Include any additional relevant information regarding this project such as existing wells to be abandoned, proposed non-standard construction methods or pending ownership changes

High Capacity, School or Wastewater Treatment Plant Well Approval Request

Form 3300-295 (R 5/15)

Proposed Well Information

Enter the following information for all proposed wells on the property. If more than two wells or alternate construction, submit additional sheets.

Well Location and Usage	○ Potable ● Non-Potable	○ Potable ○ Non-Potable
Well Name Assigned by Well Owner (North Well, etc.):	IRRIGATION WELL #1 92028	
Town/Range/Section:	NW¼SE¼ S 9 T 16N R 11E	¼ ¼ S T R
Latitude :	43.3449054	
Longitude:	89.1929744	
Water Use Code (e.g. IR10):	IR10	
Proposed Maximum Water Usage Per Day in Gallons:	1,728,000	
Proposed Maximum Water Usage Per Month in Gallons:	55,296,000	
Months of Operation (e.g. May - Sept):	MAY – SEPTEMBER	
Proposed Pump Type & Capacity(gpm):	LINE SHAFT TURBINE / 1200GPM	
Discharge Type (Over Top of Casing Seal, Pitless Adapter or Unit):	OVER TOP OF CASING, WELL SEAL	
Discharge Location (Building Pressure Tank, Pond, etc.):	IRRIGATION SYSTEM	
Distance and Direction to Nearest Public Utility Well & Well Name:	6.5 MILES EAST, WISCONSIN CONFERENCE OF 7 DAY ADVENTISTS, PO207	
Distance to Other Potential Contaminant Sources:	2.5 MILES SOUTH WEST, TOWN OF LEEDS/HAMMEN LANDFILL.	

Well Construction

Drilling Method(s) (Rotary, Percussion, Etc.):	DUAL ROTARY	
Anticipated Geological Materials and Depths that are expected during drilling:		
Material and Depth Interval:	SILTY CLAY AND GRAVEL from 0 ' to 11 '	SANDSTONE from 150 ' to 400 '
Material and Depth Interval:	SAND GRAVEL CLAY from 11 ' to 32 '	from ' to '
Material and Depth Interval:	SANDY CLAY from 11 ' to 41 '	from ' to '
Material and Depth Interval:	SHALEY SANDSTONE from 41 ' to 150 '	from ' to '

Drillhole Diameter and Anticipated Depth Intervals:

Diameter and Depth Interval:	16.0" from 0 ' to 150 '	from 0 ' to '
Diameter and Depth Interval:	16.0" from 150 ' to 400 '	from ' to '

Permanent Casing or Liner Material , If Used:

Diameter and Wall Thickness:	16.0" dia .375" thick from 0 ' to 150 '	" dia " thick from 0 ' to '
Diameter and Wall Thickness:	" dia " thick from ' to '	" dia " thick from ' to '
Casing Material and Joints (Welded, T and C, etc.):	STEEL / WELDED	
Weight at Depth Interval:	62.58 lbs/foot 0 ' to 150.0 '	lbs/foot 0 ' to '
Weight at Depth Interval:	lbs/foot ' to '	lbs/foot ' to '
Screen Material and Casing to Screen Joint (Welded, T and C, K Packer, etc.):	N/A	
Screen Slot Size in Inches and Depth Interval or N/A if none:	N/A from ' to '	from ' to '

Annular Space Material Including Filter Pack Material, If Used:

Material and Depth Interval:	GRANULAR BENTONITE 0 ' to 150 '	/ 0 ' to '

Applicant Signature

By signing this form, I certify that to the best of my knowledge, all information in the application is accurate and correct. I understand that unsigned or incomplete applications will not be approved.

Name – Print	Select One:	
JEFF KRAMER	○ Owner ● Agent of Owner	
Signature	Company	Date
Jeff Kramer	SAM'S WELL DRILLING	1/16/17

HAMPDEN

T-10-N • R-11-E

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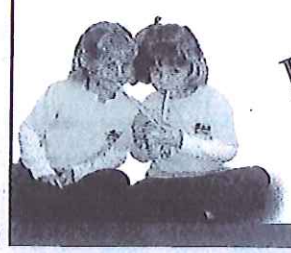
See Pages 54-55 For Additional Names.

SEE PAGE 15

SEE PAGE 9

SEE PAGE 11

DANE COUNTY



Drink Water
It does every body good!

- Well Abandonment
- Well Inspection
- Residential
- Commercial
- Industrial Well Drilling

Sam's Well Drilling

P.O. Box 150, Randolph, WI 53956
call 920-326-5193
or
1-800-321-5193 toll free

www.samswelldrilling.com

Google Maps Hall Rd

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https://www.google.com/maps/place/Hall+Rd,+Rio,+WI+53960/@43.3466591,-89.1969942,681m/data=!3m1!1e3!4m5!3m4!1s0x8806ee68ad2091bd:0xde68bcea35a466be!8m2!3d43.3507434!4d-89.2146807 1/2

STATE OF WISCONSIN

WELL CONSTRUCTOR'S REPORT — **DEPARTMENT OF RESOURCE DEVELOPMENT** — Wel 6

1. COUNTY: Columbia — CHECK ONE: ☒ Town ☐ Village ☐ City — NAME: Hampden

2. LOCATION (Number and Street or ¼ section, section, township and range. Also give subdivision name, lot and block numbers when available.)
NW¼ OF SE¼ OF SEC. 9 T-10*N R-11-E

3. OWNER AT TIME OF DRILLING
John Borde

4. OWNER'S COMPLETE MAIL ADDRESS
Columbus, Wisconsin

5. Distance in feet from well to nearest: (Record answer in appropriate block)

BUILDING	SANITARY SEWER C. I.	SANITARY SEWER TILE	FLOOR DRAIN C. I.	FLOOR DRAIN TILE	FOUNDATION DRAIN SEWER CONNECTED	FOUNDATION DRAIN INDEPENDENT	WASTE WATER DRAIN C. I.	WASTE WATER DRAIN TILE
40	–	–	–	–	–	–	–	–

CLEAR WATER DRAIN C. I.	CLEAR WATER DRAIN TILE	SEPTIC TANK	PRIVY	SEEPAGE PIT	ABSORPTION FIELD	BARN	SILO	ABANDONED WELL	SINK HOLE
–	–	81	52	–	98	130	–		–

OTHER POLLUTION SOURCES (Give description such as dump, quarry, drainage well, stream, pond, lake, etc.)

6. Well is intended to supply water for:
Farm & Home

7. DRILLHOLE

Dia. (in.)	From (ft.)	To (ft.)	Dia. (in.)	From (ft.)	To (ft.)
10	Surface	20	6	146	175
8	20	146			

8. CASING, LINER, CURBING, AND SCREEN

Dia. (in.)	Kind and Weight	From (ft.)	To (ft.)
6	Std Blk Pipe (NEW)	Surface	146
	wt. 18.97 .280 wall		
	welded jts.		

9. GROUT OR OTHER SEALING MATERIAL

Kind	From (ft.)	To (ft.)
Bentonite & Drill cuttings	Surface	146
Drilled by rotary		

10. FORMATIONS

Kind	From (ft.)	To (ft.)
Clay	Surface	49
Hardpan	49	110
Sand & Gravel	110	144
Lime rock	144	175
D.C. Dec 5 1968		

11. MISCELLANEOUS DATA

Yield test: 4 Hrs. at 30 GPM

Depth from surface to normal water level 63 ft.

Depth to water level when pumping 88 ft.

Well construction completed on Nov. 4-68 19

Well is terminated 8 inches ☒ above ☐ below final grade

Well disinfected upon completion ☒ Yes ☐ No

Well sealed watertight upon completion ☒ Yes ☐ No

Water sample sent to Madison laboratory on: Nov. 5 19 68

Your opinion concerning other pollution hazards, information concerning difficulties encountered, and data relating to nearby wells, screens, seals, type of casing joints, method of finishing the well, amount of cement used in grouting, blasting, subsurface pumprooms, access pits, etc., should be given on reverse side.

SIGNATURE: Sam Vanden Heuvel Jr. Registered Well Driller

COMPLETE MAIL ADDRESS: Route 2, Randolph, Wisconsin

Please do not write in space below

COLIFORM TEST RESULT	GAS — 24 HRS.	GAS — 48 HRS.	CONFIRMED	REMARKS
1759				

WISCONSIN UNIQUE WELL NUMBER **NR676**

Source: WELL CONSTRUCTION

State of Wi-Private Water Systems-DG/2
Department Of Natural Resources, Box 7921
Madison, WI 53707

Form 3300-77A
(Rev 02/02)bw

Property Owner: BORDE, JOHN — Telephone Number: 920-992-3386

Mailing Address: W3344 HWY 60

City: COLUMBUS — State: WI — Zip Code: 53925

County of Well Location: 11 COLUMBIA — SC

Co Well Permit No: W

Well Completion Date: August 16, 2002

Well Constructor: CENTRAL WELL DRILLING LLC — License #: 4231

Facility ID (Public):

Address: PO BOX 405 400 S WOODWARD ST

Public Well Plan Approval#:

City: BRANDON — State: WI — Zip Code: 53919

Date Of Approval:

Hicap Permanent Well #: — Common Well #:

Specific Capacity: .6 gpm/ft

Depth 148 FT

1. Well Location

T=Town C=City V=Village: T of HAMPDEN

Fire#:

Street Address or Road Name and Number: HALL RD

Subdivision Name: — Lot#: — Block #:

Gov't Lot: — or NE 1/4 of SE 1/4 of

Section 9 T 10 N R 11 E

2. Well Type 1 (See item 12 below)

1=New 2=Replacement 3=Reconstruction

of previous unique well # _____ constructed in _____

Reason for replaced or reconstructed Well?

1 1=Drilled 2=Driven Point 3=Jetted 4=Other

3. Well Serves P # of homes and or (eg: barn, restaurant, church, school, industry, etc.)

M=Munic O=OTM N=NonCom P=Private Z=Other X=NonPot A=Anode L=Loop H=Drillhole

High Capacity: Well? N Property? N

4. Is the well located upslope or sideslope and not downslope from any contamination sources, including those on neighboring properties? Y

Well located in floodplain? N

Distance in feet from well to nearest: (including proposed)

1. Landfill
16 2. Building Overhang
3. 1=Septic 2= Holding Tank
4. Sewage Absorption Unit
5. Nonconforming Pit
6. Buried Home Heating Oil Tank
7. Buried Petroleum Tank
8. 1=Shoreline 2= Swimming Pool
9. Downspout/ Yard Hydrant
10. Privy
11. Foundation Drain to Clearwater
12. Foundation Drain to Sewer
13. Building Drain 1=Cast Iron or Plastic 2=Other
14. Building Sewer 1=Gravity 2=Pressure 1=Cast Iron or Plastic 2=Other
15. Collector Sewer: ___ units ___ in . diam.
16. Clearwater Sump
17. Wastewater Sump
18. Paved Animal Barn Pen
19. Animal Yard or Shelter
20. Silo
21. Barn Gutter
22. Manure Pipe 1=Gravity 2=Pressure 1=Cast iron or Plastic 2=Other
23. Other manure Storage
24. Ditch
25. Other NR 812 Waste Source

5. Drillhole Dimensions and Construction Method

Dia.(in.)	From (ft)	To (ft)
8.8	surface	62
6.0	62	148

Upper Enlarged Drillhole — Lower Open Bedrock

X -- 1. Rotary - Mud Circulation
X -- 2. Rotary - Air
-- 3. Rotary - Air and Foam
-- 4. Drill-Through Casing Hammer
-- 5. Reverse Rotary
-- 6. Cable-tool Bit _ n. dia
-- 7. Temp. Outer Casing _ in. dia. _____ depth ft. Removed ?
Other

6. Casing Liner Screen Material, Weight, Specification Manufacturer & Method of Assembly

Dia. (in.)		From (ft.)	To (ft.)
6.0	NEW BLACK STEEL 18.97# PER FT. 1780 PSI ASTM A-53 GR. B P.E. USA IPSCO	surface	62

Dia.(in.)	Screen type, material & slot size	From	To

7. Grout or Other Sealing Material

Method TREMIE PIPE PUMPED

Kind of Sealing Material	From (ft.)	To (ft.)	# Sacks Cement
MUD & CUTTINGS	surface	6.0	
CEMENT	6.0	62.0	1 S

Geology Codes	8. Geology Type, Caving/Noncaving, Color, Hardness, etc	From (ft.)	To (ft.)
__ZM	SILTY CLAY, GRAVEL	0	11
__YC	SAND, GRAVEL, CLAY LAYERS	11	32
__CS	SANDY CLAY	32	41
__NH	SHALEY SANDROCK	41	120
__N_	SANDROCK	120	148

9. Static Water Level
58.0 feet B ground surface (A=Above B=Below)

10. Pump Test
Pumping level 90.0 ft. below surface
Pumping at 20.0 GP M 1.0 Hrs

11. Well Is: 12 in. A Grade (A=Above B=Below)
Developed? Y
Disinfected? Y
Capped? Y

12. Did you notify the owner of the need to permanently abandon and fill all unused wells on this property?
If no, explain NA

13. Initials of Well Constructor or Supervisory Driller: TRO — Date Signed: 8/16/02

Initials of Drill Rig Operator (Mandatory unless same as above): SS — Date Signed: 8/16/02

Additonal Comments?
Owner Sent Label? Y
Variance Issued?
More Geology?

Batch 821