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DRINKING WATER & GW

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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)

JUN 16 2016

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 Steve McReath		Company	
Street Address 11940 Cty. Rd. F		City Montello	State WI
Phone Number (include area code)		Fax Number	Email Address rcreath@yahoo.com

Owner Information (if different than applicant)

Name and Title		Company	
Street Address		City	State ZIP Code
Phone Number (include area code)		Fax Number	Email Address

Operator Information (if different than owner)

Name and Title		Company	
Street Address		City	State ZIP Code
Phone Number (include area code)		Fax Number	Email Address

Submittal Purpose

Check all that apply

Non-Potable Well(s) Potable Well(s) Requires Potable Attachments

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).

Required Enclosures

<input checked="" type="checkbox"/> High Capacity Well Application (Form 3300-295)	<input type="checkbox"/> Potable Attachment: if a proposed well is potable (Form 3300-295A)
<input checked="" type="checkbox"/> \$500 application fee (see s. 281.34 (2), Wis. Stats.)	<input checked="" type="checkbox"/> Aerial or Plat Map with property boundaries outlined
<input type="checkbox"/> Well Construction Reports (if available) for existing wells	<input type="checkbox"/> Variance Request, if needed (Form 3300-210)

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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: Steve McReath Company: Contact Steve McReath

Owner Information

Name and Title: _____ Company: _____

County <u>Marquette</u>	Town <u>14 N</u>	Range <u>09</u>	<input checked="" type="radio"/> East <input type="radio"/> West	Section <u>12</u>	High Capacity Well File No. (if applicable)
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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)		WUWN or WCR Image File # (if known)
				Latitude	Longitude	
<u>Well # 1 (Proposed)</u>	<u>IR10</u>		<u>1000</u>	<u>43.708962864°</u>	<u>-89.370158459°</u>	

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)

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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	<input type="radio"/> Potable	<input checked="" type="radio"/> Non-Potable	<input type="radio"/> Potable	<input type="radio"/> Non-Potable
Well Name Assigned by Well Owner (North Well, etc.):	Well # 1 9762			
Town/Range/Section:	NE 1/4 NE 1/4 S12 T14 N R 09 E		1/4	1/4 S T R
Latitude :	43° 42' 29.66" N 43.7089		43.7089	
Longitude:	-89° 22' 14.28" W 89.3706		-89.3702	
Water Use Code (e.g. IR10):	IR 10			
Proposed Maximum Water Usage Per Day in Gallons:	1,440,000			
Proposed Maximum Water Usage Per Month in Gallons:	43,200,000			
Months of Operation (e.g. May - Sept):	May - September			
Proposed Pump Type & Capacity(gpm):	Lineshaft (1000)			
Discharge Type (Over Top of Casing Seal, Pitless Adapter or Unit):	Over top of casing seal			
Discharge Location (Building Pressure Tank, Pond, etc.):	To center pivot system			
Distance and Direction to Nearest Public Utility Well & Well Name:	E APP. 8m. to Montello			
Distance to Other Potential Contaminant Sources:				

Well Construction

Drilling Method(s) (Rotary, Percussion, etc.):	mud rotary		
Anticipated Geological Materials and Depths that are expected during drilling:			
Material and Depth Interval:	Sand & clay	from 0' to 40'	from 0' to
Material and Depth Interval:	Gravel	from ' to	from ' to
Material and Depth Interval:	Sand / gravel	from 40' to 138'	from ' to
Material and Depth Interval:	Sandstone	from 138' to 144'	from ' to
Drillhole Diameter and Anticipated Depth Intervals:			
Diameter and Depth Interval:	16"	from 0' to 144'	from 0' to
Diameter and Depth Interval:	16"	from 144' to 320'	from ' to

Permanent Casing or Liner Material, If Used:

Diameter and Wall Thickness:	16" dia .375" thick	from 0' to 144'	" 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.):	welded		
Weight at Depth Interval:	62.5 lbs/foot	0' to 144'	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.):	Johnson Galv. V-Wire welded		
Screen Slot Size in Inches and Depth Interval or N/A if none:	1060"	from 300' to 320'	from ' to

Annular Space Material Including Filter Pack Material, If Used:

Material and Depth Interval:	Gravel pack	10' to	10' to
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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:	
Wilbur Baughman	<input type="radio"/> Owner	<input checked="" type="radio"/> Agent of Owner
Signature	Company	Date
<i>Wilbur Baugh</i>	Oasis Irrigation	6/9/2016
	715-335-8300	



Google earth

feet
meters

2000

800



43.708962864
-89.370158459