

2512

prop. 14193

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AUG 29 2016

Non-Potable High Capacity Well Approval Request

Form 3300-295 (R 5/14)

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Return completed forms to:

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

DRINKING WATER & GW

Notice: Prior department approval is required for the construction, reconstruction or operation of a non-potable high capacity well or system of non-potable high capacity wells in accordance with Section NR 812.09(4)(a), Wis. Adm. Code. Use this form to request an approval for installation of a well or wells on a high capacity property or to modify a well on a high capacity property. 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.).

1. Applicant Information

Owner (Name of Person and Title) Paul Roberts, President		Company Roberts Irrigation Company, Inc.	
Street Address PO Box 490, 1500 Post Road		City Plover	State WI
		ZIP Code 54467	
Phone Number (include area code) 715 344 4747	Fax Number 715 344 4505	Email Address proberts@callroberts.com	

2. Owner Information (if different than applicant)

Owner (Name of Person and Title) University of Wisconsin Regents		Company	
Street Address 610 Walnut Street		City Madison	State WI
		ZIP Code 53705	
Phone Number (include area code)	Fax Number	Email Address	

3. Operator Information

Operator, if different than owner (Name of Person and Title) same Leleh Starks Elite Foundation Seed Potato Farm		Company Keith Heinzen	
Street Address 7749 CTH K		City Rhinelander	State WI
		ZIP Code 54501	
Phone Number (include area code) 715-282-5530	Fax Number	Email Address kheinzen@wisc.edu	

4. Submittal Purpose

Check all that apply

- 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, explain

5. Project Description

Provide a brief description of the proposed project. Include number of acres and expected crop rotation for agricultural irrigation wells.
High Capacity well project to provide irrigation for 640 acres for UW Leleh Starks Potato Research Farm

6. Required Enclosures

- Non-Potable High Capacity Well Application Form.
- Aerial or Plat Map with property boundaries outlined.
- Variance Request, if needed (Form 3300-210)
- \$500 application fee (See s. 281.34 (2), Wis. Stats.)
- Well Construction Reports (if available) for existing wells.

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Applicant Information

Application Prepared By (Name and Title) Paul Roberts, President	Company Roberts Irrigation Company, Inc.
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Property Information

Property owner, if different than applicant (Name of Person and Title)	Company
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County Oneida	Town 37 N	Range 07	<input checked="" type="radio"/> East <input type="radio"/> West	Section 35	High Capacity Well File No. (if applicable) n/a
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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, please 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	
existing (with handwritten notes)	DS11	n/a	12	45.446491	89.5844	EJ973
		91855				

Additional Project Information

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

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WISCONSIN UNIQUE WELL NUMBER
SOURCE: WELL CONSTRUCTION **EJ973**

Property Owner **UNIVERSITY OF WISCONSIN** Telephone Number **608 - 236 - 3024**
 Owner **REGENT**

Mailing Address **610 WALNUT ST**

City **MADISON** State **WI** Zip Code **53705**

County of Well Location **44 ONEIDA** NO Co Well Permit No **W** Well Completion Date **November 14, 1991**

State of Wi-Private Water Systems-DG/2 Department Of Natural Resources, Box 7921 Madison, WI 53707
 Form 3300-77A (Rev 12/00)

Depth **114** FT

Well Constructor **RHINELANDER WELL** License # **632** Facility ID (Public)

Address **PO BOX 584** Public Well Plan Approval#

City **RHINELANDER** State **WI** Zip Code **54501** Date Of Approval

Hicap Well # **1.1** gpm/ft Common Well #

1. Well Location
 T **T** T=Town C=City V=Village
 of **CASSIAN** Fire#

Street Address or Road Name and Number **HWY K**

Subdivision Name Lot# Block #

Gov't Lot or **NW** 1/4 of **SW** 1/4 of
 Section **35 T 37 N R 7 E**

2. Well Type **1** 1=New
 2=Replacement (See item 12 below)
 3=Reconstruction
 of previous unique well # _____ constructed in **0**
 GRN Status

3. Well Serves # of homes and or
 (eg: barn, restaurant, church, school, industry, etc.)
N M=Munic O=OTM N=NonCom P=Private Z=Other
 X=NonPot A=Anode L=Loop H=Drillhole

High Capacity: Well? **N** Property? **N**

Reason for replaced or reconstructed Well?
1 1=Drilled 2=Driven Point 3=Jetted 4=Other

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	9. Downspout/ Yard Hydrant	17. Wastewater Sump
15 2. Building Overhang	10. Privy	18. Paved Animal Barn Pen
310 3. 1=Septic 2= Holding Tank	11. Foundation Drain to Clearwater	19. Animal Yard or Shelter
280 4. Sewage Absorption Unit	12. Foundation Drain to Sewer	20. Silo
5. Nonconforming Pit	13. Building Drain	21. Barn Gutter
6. Buried Home Heating Oil Tank	1=Cast Iron or Plastic 2=Other	22. Manure Pipe 1=Gravity 2=Pressure
7. Buried Petroleum Tank	14. Building Sewer 1=Gravity 2=Pressure	1=Cast iron or Plastic 2=Other
8. 1=Shoreline 2= Swimming Pool	1=Cast Iron or Plastic 2=Other	23. Other manure Storage
	15. Collector Sewer: ___ units ___ in . diam.	24. Ditch
	16. Clearwater Sump	25. Other NR 812 Waste Source

5. Drillhole Dimensions and Construction Method

From To Upper Enlarged Drillhole			Lower Open Bedrock
Dia.(in.)	(ft)	(ft)	
10.0	surface	93	-- 1. Rotary - Mud Circulation -----
			-- 2. Rotary - Air -----
			-- 3. Rotary - Air and Foam -----
6.0	93	114	-- 4. Drill-Through Casing Hammer
			-- 5. Reverse Rotary
			-- 6. Cable-tool Bit ___ in. dia -----
			-- 7. Temp. Outer Casing ___ in. dia. ___ depth ft. Removed?
			Other

8. Geology

Geology Codes	Type, Caving/Noncaving, Color, Hardness, etc	From (ft.)	To (ft.)
QS	CAVING SAND	0	24
Y	SAND @ GRAVEL	24	39
X	SAND @ CLAY	39	77
Z	CLAY @ GRAVEL	77	96
S	SAND	96	103
Y	SAND @ GRAVEL	103	114

6. Casing Liner Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6.0	A-53 GRADE B PLAIN END WELDED 18.97 #/FT. SAWHILLPIPE MFG.	surface	98
Dia.(in.)	Screen type, material & slot size	From	To
6.0	15-20-15-15-7 SLOTS STAINLESS STEEL	98	114

9. Static Water Level
 32.0 feet **B** ground surface
 A=Above B=Below

11. Well Is: **A** Grade
 12 in. A=Above B=Below

10. Pump Test
 Pumping level 74.0 ft. below surface
 Pumping at 45.0 GP 9.00hrs

Developed? **Y**
 Disinfected? **Y**
 Capped? **Y**

7. Grout or Other Sealing Material

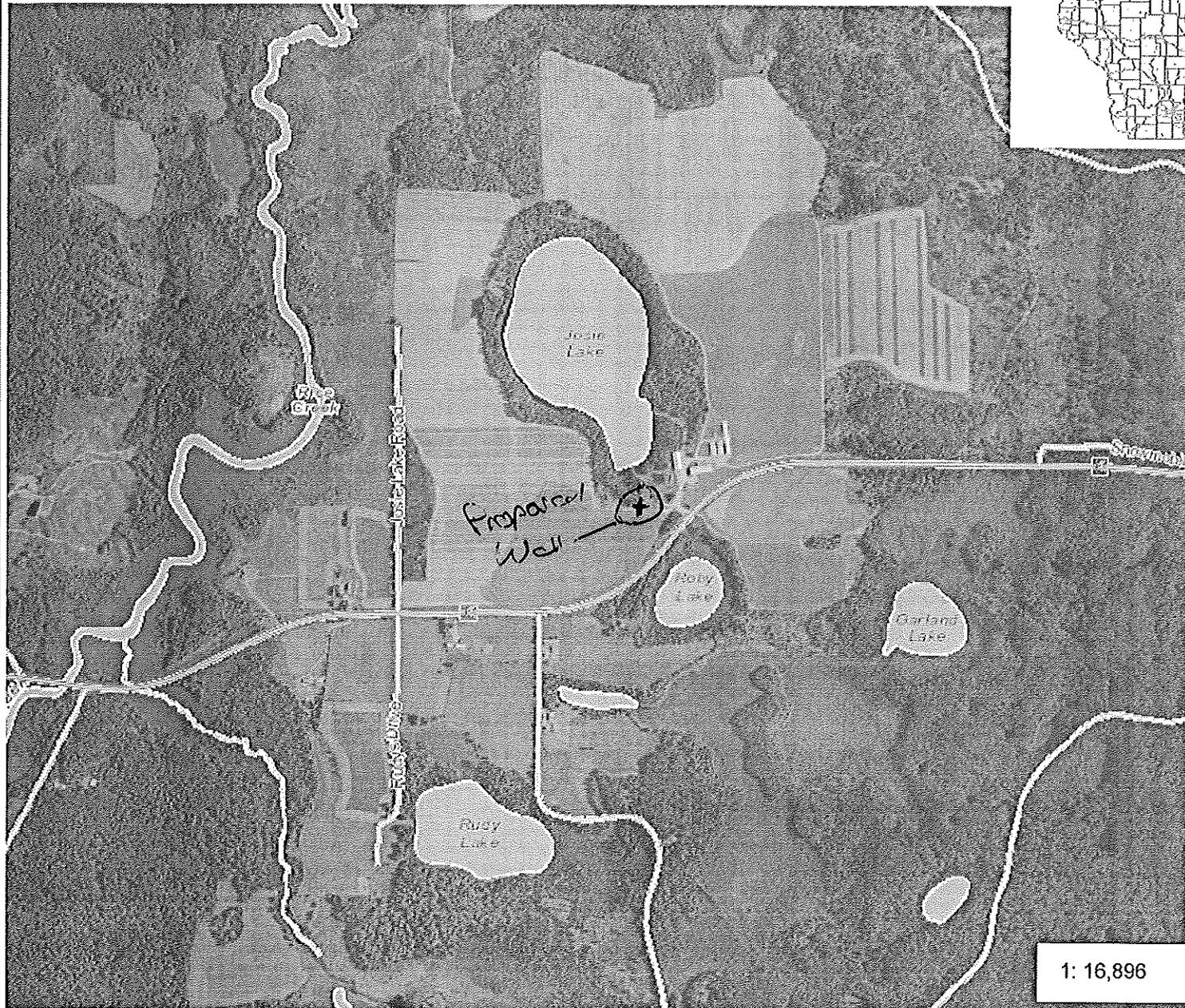
#

12. Did you notify the owner of the need to permanently abandon and fill all

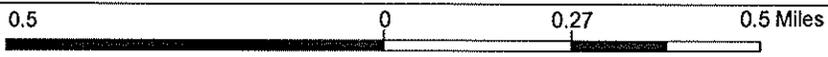
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proposed well



1: 16,896



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