

7509

prop. 14192

(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 plant 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 JEFF HAUPT		Company HAUPT WELL DRILLING INC	
Street Address P.O. BOX 136		City AUBURNDALE	State WI
Phone Number (include area code) 715-652-2236	Fax Number 715-652-8014	Email Address	

Owner Information (if different than applicant)

Name and Title WICHMAN FARM LAND LLC		Company CONTACT: MATT WICHMAN	
Street Address E5851 LONG LAKE ROAD		City MARION	State WI
Phone Number (include area code) 920-915-2145	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).

NON-POTABLE IRRIGATION WELL TO IRRIGATE ~ 40 ACRES.  
CROP ROTATION OF CORN & SOY BEANS.

Required Enclosures

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

# 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.

<b>Well Location and Usage</b>		<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.):	91851				
Town/Range/Section:	SW 1/4 NE 1/4 S24 T25N R12E	1/4	1/4 S	T	R
Latitude:	44.6283				
Longitude:	88.9887				
Water Use Code (e.g. IR10):	IR10				
Proposed Maximum Water Usage Per Day in Gallons:	864,000				
Proposed Maximum Water Usage Per Month in Gallons:	25,920,000				
Months of Operation (e.g. May - Sept):	MAY - SEPTEMBER				
Proposed Pump Type & Capacity(gpm):	LINESHAFT TURBINE (600)				
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:	~6 MILES NE TO MARION				
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 & GRAVEL	from 0	' to 75	'	from 0	' to	'
Material and Depth Interval:		from	' to	'	from	' to	'
Material and Depth Interval:		from	' to	'	from	' to	'
Material and Depth Interval:		from	' to	'	from	' to	'
Drillhole Diameter and Anticipated Depth Intervals:							
Diameter and Depth Interval:	20"	from 0	' to 75	'	from 0	' to	'
Diameter and Depth Interval:		from	' to	'	from	' to	'

## Permanent Casing or Liner Material, If Used:

Diameter and Wall Thickness:	14" dia .25" thick	from 0	' to 55	'	" 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.):	A53B (welded)								
Weight at Depth Interval:	37 lbs/foot	0	' to 55	'	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:	.060"	from 55	' to 75	'	from	' to	'	'	'

## Annular Space Material Including Filter Pack Material, If Used:

Material and Depth Interval:	BENTONITE CUTTINGS	0	' to 35	'	/	0	' 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:
JEFF HAUPT	<input type="radio"/> Owner <input checked="" type="radio"/> Agent of Owner
Signature	Date
Jeff Haupt	8/25/16
Company	
HAUPT WELL DRILLING INC	

