



# High Capacity Well Application Instructions for Completing

This document provides basic instructions to those filling out a high capacity well application. It highlights new features and key differences from the old form.

If you have any questions completing the application, please contact the water use section at 608-266-2299 or [dnrwateruserregistration@wisconsin.gov](mailto:dnrwateruserregistration@wisconsin.gov)

Save... Print All Print Second Part Export Raw Data Clear Data

Return completed forms to:  
Wisconsin Department of Natural Resources  
Bureau of Drinking Water & Groundwater - DGWS  
PO Box 7921, Madison, WI 53707-7921  
[dnr.wis.gov](http://dnr.wis.gov)

### High Capacity, School or Wastewater Treatment Plant Well Approval Request

Form 3300-295 (R 5/15) Page 1 of 4

Notice: Pursuant to §§ NR 812.00(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 requestors to the extent required by Wisconsin's Open Records law (s. 19.31-19.39, Wis. Stats.).

**Applicant Information**  
Name and Title \_\_\_\_\_  
Street Address \_\_\_\_\_  
Phone Number (include area code) \_\_\_\_\_

**Owner Information**  
Name and Title \_\_\_\_\_  
Street Address \_\_\_\_\_  
Phone Number (include area code) \_\_\_\_\_

**Operator Information**  
Name and Title \_\_\_\_\_  
Street Address \_\_\_\_\_  
Phone Number (include area code) \_\_\_\_\_

**Submission Purpose**  
Check all that apply:  
 Non-Potable W  
 Install one or more  
 Replace one or more  
 Reconstruct or increase pump  
 Renew a prev  
 Other (please specify) \_\_\_\_\_

**Project Description**  
Provide a brief description of the number of acres and currently or plans to be used for \_\_\_\_\_

**Required Enclosure**  
 High Capacity W  
 8500 application  
 Well Construction

Save... Print All Print Second Part Export Raw Data Clear Data

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### High Capacity, School or Wastewater Treatment Plant Well Approval Request

Form 3300-295 (R 5/15) Page 3 of 4

This form is used to request 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:  
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Bureau of Drinking Water & Groundwater - DGWS  
PO Box 7921  
Madison, WI 53707-7921

**Applicant Information**  
Name and Title \_\_\_\_\_  
Street Address \_\_\_\_\_  
Phone Number (include area code) \_\_\_\_\_

**Owner Information**  
Name and Title \_\_\_\_\_  
Street Address \_\_\_\_\_  
Phone Number (include area code) \_\_\_\_\_

**County** \_\_\_\_\_

**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			
Well Name Assigned by Well Owner (North, West, etc.)	1/4	1/4 S	T	R	1/4	1/4 S	T	R
Latitude:								
Longitude:								
Water Use Code (e.g. IR10):								
Proposed Maximum Water Usage Per Day in Gallons:								
Proposed Maximum Water Usage Per Month in Gallons:								
Months of Operation (e.g. May - Sept):								
Proposed Pump Type & Capacity(gpm):								
Discharge Type (Over Top of Casing Seal, Pile-up Adapter or Liner):								
Discharge Location (Building Pressure Tank, Pond, etc.):								
Distance and Direction to Nearest Public Utility Well & Well Name:								
Distance to Other Potential Contaminant Sources:								

**Well Construction**  
(Drilling Methods)  
Anticipated Geological Materials and Depths that are expected during drilling:

Material and Depth Interval:	from	' to	from	' 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:	from	' to	from	' to
Diameter and Depth Interval:	from	' to	from	' to

**Permanent Casing or Liner Material, If Used:**

Diameter and Wall Thickness:	" dia	" thick	from	' to	" dia	" thick	from	' to
Diameter and Wall Thickness:	" dia	" thick	from	' to	" dia	" thick	from	' to

**Casing Material and Joints (Welded, T and C, etc.):**

Weight at Depth Interval:	lbs/foot	0	' to	lbs/foot	0	' to
Weight at Depth Interval:	lbs/foot	0	' to	lbs/foot	0	' to

**Screen Material and Casing to Screen Joint (Welded, T and C, K, Packer, etc.):**

Screen Size in Inches and Depth Interval or N/A if none:	from	' to	from	' to
Screen Size in Inches and Depth Interval or N/A if none:	from	' to	from	' to

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

Material and Depth Interval:	from	' to	from	' to
Material and Depth Interval:	from	' to	from	' to

**Applicant's 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:  Owner  Agent of Owner

Signature \_\_\_\_\_ Company \_\_\_\_\_ Date \_\_\_\_\_



# High Capacity Well Application Overview of Features

- The application was designed to be shorter to fit needs of all high capacity applications.
  - There is one high capacity well application and a potable attachment required for any proposed potable wells.
- Key Changes are:
  - All fields are required unless explanation is given.
  - It is a fillable PDF that can be saved and emailed.
  - At the outset, payment and a paper copy of the application are still required to be sent by mail.
  - Emailed applications will be entered and put in queue upon receipt but will not be reviewed until fee is received.

Save... Print All Print Second Part Export Raw Data Clear Data

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**High Capacity, School or Wastewater Treatment Plant Well Approval Request**  
Form 3300-295 (R 5/15) Page 1 of 4

Notice: Pursuant to §§ NR 812.00(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 requestors to the extent required by Wisconsin's Open Records law (s. 19.31-19.39, Wis. Stats.).

Applicant Information  
Name and Title  
Street Address  
Phone Number (include area code)

Owner Information  
Name and Title  
Street Address  
Phone Number (include area code)

Operator Information  
Name and Title  
Street Address  
Phone Number (include area code)

Submittal Purpose  
Check all that apply  
 Non-Potable  
 Install one or more  
 Is a proposed  
 Are you a Wisconsin resident?  
 Are you a Wisconsin resident?  
 Replace one or more  
 Reconstruct or reconstruct  
 Increase pump  
 Renew a previous  
 Other (please specify)

Project Description  
Provide a brief description of the number of acres and currently or plans to be used for

Required Enclosure  
 High Capacity Well  
 8500 application  
 Well Construction

Save... Print All Print Second Part Export Raw Data Clear Data

Return completed forms to:  
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**High Capacity, School or Wastewater Treatment Plant Well Approval Request**  
Form 3300-295 (R 5/15) Page 3 of 4

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:  
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PO Box 7921  
Madison, WI 53707-7921

Applicant Information  
Name and Title  
Street Address  
Phone Number (include area code)

Owner Information  
Name and Title  
Street Address  
Phone Number (include area code)

County

**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, West, etc.)  
Town/Range/Section: 1/4 1/4 S T R 1/4 1/4 S T R  
Latitude:  
Longitude:

Water Use Code (e.g. IR10):  
Proposed Maximum Water Usage Per Day in Gallons:  
Proposed Maximum Water Usage Per Month in Gallons:  
Months of Operation (e.g. May - Sept):  
Proposed Pump Type & Capacity(gpm):  
Discharge Type (Over Top of Casing Seal, Pileup Adapter or Liner):  
Discharge Location (Building Pressure Tank, Pond, etc.):  
Distance and Direction to Nearest Public Utility Well & Well Name:  
Distance to Other Potential Contaminant Sources:

Well Construction (Drilling Methods) (Rotary, Percussion, Etc.):  
Anticipated Geological Materials and Depths that are expected during drilling:  
Material and Depth Interval: from 0' to ' 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: from 0' to ' from 0' to '  
Diameter and Depth Interval: from ' to ' from ' to '  
Diameter and Wall Thickness: " dia " thick from 0' to ' " 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.):  
Weight at Depth Interval: lbs/foot 0' to ' 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.):  
Screen Size in Inches and Depth Interval or N/A if none: from ' to ' from ' to '  
Annular Space Material Including Filter Pack Material, if Used:  
Material and Depth Interval: / 0' to ' / 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  
Signature Company Select One:  Owner  Agent of Owner Date



# High Capacity Application

## Page One – Controls

- **Save** - When starting a new application, we recommend you save a version of each application for your records.
- **Print All** – Prints the entire document.
- **Print Second Part** – Prints only the second page.
- **Export raw data** – For DNR use.
- **Clear data** – Clears entire form.

<a href="#">Save...</a>	<a href="#">Print All</a>	<a href="#">Print Second Part</a>	<a href="#">Export Raw Data</a>	<a href="#">Clear Data</a>
<b>Return completed forms to:</b> Wisconsin Department of Natural Resources Bureau of Drinking Water & Groundwater – DG/5 PO Box 7921, Madison, WI 53707-7921 <a href="http://dnr.wi.gov">dnr.wi.gov</a>		<b>High Capacity, School or Wastewater Treatment Plant Well Approval Request</b> Form 3300-295 (R 5/15) <span style="float: right;">Page 1 of 4</span>		
<b>Notice:</b> 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.).				
<b>Applicant Information</b>				
Name and Title			Company	
<input type="text"/>			<input type="text"/>	



# High Capacity Application

## Page One – Applicant and Owner Info

The first section is designed to obtain applicant, owner and operator information. This page contains personal information and will not be displayed online.

- **Applicant Information** – In most cases, this will be the property owner or well driller.
- **Owner Information** - The owner is the legal entity that owns the property on which the proposed well will be located.
  - *This information must match the ownership in county land records. If a transaction is pending or recently occurred, this should be noted in the additional project information.*
- **Operator Information** – This is the person or entity that will operate the well when it is completed.

**Notice:** Prior department approval is required for the construction, reconstruction or operation of non-potable high capacity wells in accordance with Section NR 812.09(4)(a), Wis. Adm. C. Installation of a well or wells on a high capacity property or to modify a well on a high capacity property collected will be used for administrative purposes and may be provided to requesters to the Department of Natural Resources (s.19.31-19.39, Wis. Stats.).

1. Applicant Information		
Owner (Name of Person and Title)		Company
Street Address		City
Phone Number (include area code)	Fax Number	Email Address
2. Owner Information (if different than applicant)		
Owner (Name of Person and Title)		Company
Street Address		City
Phone Number (include area code)	Fax Number	Email Address
3. Operator Information		
Operator, if different than owner (Name of Person and Title)		Company
Street Address		City
Phone Number (include area code)	Fax Number	Email Address
4. Submittal Purpose		
<input type="checkbox"/> Check all that apply		



# High Capacity Application

## Page One – Purpose, Project and Enclosures

- **Purpose** – Check all that apply
- **Project Description** – Describe project including any details that will help inform the review.
  - For irrigation wells, the following must be included: Planned crop rotation or irrigation use and Land acreage that will be irrigated.
  - For potable wells serving livestock note whether the facility is or will become a CAFO.
- **Required Enclosures** – For the application to be considered complete all applicable enclosures are required.

### Submittal Purpose

Check all that apply

- |   |  |
|---|--|
| <input type="checkbox"/> <b>Non-Potable Well(s)</b>   | <input type="checkbox"/> <b>Potable Well(s) Requires Potable Attachments</b> |
| <input type="checkbox"/> Install one or more new wells with a capacity greater than 70 gallons per minute.                          |  |
| <input type="checkbox"/> Install one or more new wells with a capacity less than 70 gallons per minute on a high capacity property. |  |
| <input type="checkbox"/> Replace one or more wells with a capacity greater than 70 gallons per minute.                              |  |
| <input type="checkbox"/> Replace one or more wells with a capacity less than 70 gallons per minute on a high capacity property.     |  |
| <input type="checkbox"/> Reconstruct one or more wells with a capacity greater than 70 gallons per minute.                          |  |
| <input type="checkbox"/> Reconstruct one or more wells with a capacity less than 70 gallons per minute on a high capacity property. |  |
| <input type="checkbox"/> Increase pumping rate in one or more wells to a rate greater than previously approved.                     |  |
| <input type="checkbox"/> Renew a previous approval that has expired.  |  |
| <input type="checkbox"/> 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 type="checkbox"/> High Capacity Well Application (Form 3300-295)              | <input type="checkbox"/> Potable Attachment: if a proposed well is potable (Form 3300-295A) |
| <input type="checkbox"/> \$500 application fee (see s. 281.34 (2), Wis. Stats.)      | <input 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)                        |



# High Capacity Application

## Page Two

The second page is intentionally left blank to allow it to be separated from the remaining part of the application that will be posted online.

High Capacity, School or Wastewater Treatment Plant  
Well Approval Request

Form 3300-295 (R 5/15)

Page 2 of 4

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# High Capacity Application Page Three – General Information


- **Applicant** – This is the person that will sign the form and who should be contacted with questions regarding the proposed well construction or water withdrawal.
- **Property information** – Owner and general location of the proposed well. If the well is already a high capacity property, include the file number. If you do not know this number, contact DNR staff at 608-266-2299 or [dnrwateruserregistration@wisconsin.gov](mailto:dnrwateruserregistration@wisconsin.gov)
- **Landfills** – If the proposed well is located within 1200 feet of a landfill, note the location of the landfill.
- **Non-compliant wells** – If the applicant is aware that there is a non-compliant well located on the property, this box must be checked and details attached.

<b>Applicant Information</b>					
Application Prepared By (Name and Title)				Company	
<b>Property Information</b>					
Property owner, if different than applicant (Name of Person and Title)				Company	
County	Town	Range	<input type="radio"/> East <input type="radio"/> West	Section	High Capacity Well File No. (if applicable)
	N				
Yes No <input type="radio"/> <input type="radio"/> Is a proposed well within 1,200 feet of a landfill? Landfill location: (Township/Range/Section): T R S <input type="radio"/> <input type="radio"/> 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.					



# High Capacity Application

## Page Three – General Information

- **Existing Well Information** – All existing wells must be listed on the application. Applications are not considered complete unless all wells are listed.
  - **Well Name** – How the owner references this well i.e. house well, irrigation well #3, calf barn well, etc...
  - **Water Use Code** – Select the main use of the well from the check down list. If there are multiple uses for a well, choose the one that uses the most water per year.
  - **High capacity well number** – If the well is on an existing high capacity property, it should already have a hicap number.
  - **Pump Capacity** – Pump capacity of the existing well in gallons per minute.
  - **Coordinates** – enter the latitude and longitude of the well. Decimal degree (e.g. 45.12345) format is preferred, but other formats are acceptable. (e.g. 45 7.407' or 45 7' 24")
  - **WUWN or WCR Image File number** – These can be found on the [DNR](#) or [DATCP](#) websites. These may not be available for all wells.
  - If you need more space, more fields can be added by clicking the 

### 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	





# High Capacity Application

## Page Three – Additional Information

- **Additional Project Information** – This section provides the opportunity for the applicant to describe any additional information relevant to the proposed well construction. This may include:
  - Wells that will be abandoned following construction of the new well.
  - Property ownership issues or pending changes.
  - Non-standard construction methods.
  - Additional information that cannot be addressed in space provided in the form.

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



# High Capacity Application

## Page Four – Proposed Well Information

- **Well Location and Usage**– Room is provided for two proposed wells. If more wells are proposed, create an additional application.
- **Coordinates** – Enter the latitude and longitude of the well. Decimal degree (e.g. 45.12345) format is preferred, but others can be used at this time. (e.g. 45 7.407’ or 45 7’ 24”)
- **Water Use Code** – Select the main use of the well from the check down list. If there are multiple uses for a well, choose the one that uses the most water per year.
- **Requested Water Volumes** – In the appropriate fields, enter the proposed pump capacity, the maximum daily use and maximum monthly use for the proposed source. Average use is no longer requested.

Proposed Well Information				
Enter the following information for all proposed wells on the property. If more than two wells are proposed, create an additional application.				
<b>Well Location and Usage</b>				
Well Name Assigned by Well Owner (North Well, etc.):				
Town/Range/Section:	¼	¼	S	T R
Latitude :				
Longitude:				
Water Use Code (e.g. IR10):	▼			
Proposed Maximum Water Usage Per Day in Gallons:				
Proposed Maximum Water Usage Per Month in Gallons:				
Months of Operation (e.g. May - Sept):				
Proposed Pump Type & Capacity(gpm):				
Discharge Type (Over Top of Casing Seal, Pitless Adapter or Unit):				
Discharge Location (Building Pressure Tank, Pond, etc.):				
Distance and Direction to Nearest Public Utility Well & Well Name:				
Distance to Other Potential Contaminant Sources:				
<b>Well Construction</b>				





# Hicap Application Page Four– Signature

- **Name and Signature** - This person is responsible for certifying that the information in the application is accurate and correct to the best of their knowledge.
- **Owner or Agent** - The application can be signed by the owner or an agent of the owner. Check the appropriate box.

<b>Applicant Signature</b>		
Name – Print		Select One:
		<input type="radio"/> Owner <input type="radio"/> Agent of Owner
Signature	Company	Date
By signing this form, the person certifies that to the best of his or her knowledge, all information in the application is accurate and correct. Unsigned or incomplete applications will not be approved.		



# Hicap Application

## Page Five– Potable Attachment

- The potable high capacity well attachment is required only if a proposed well on the application is potable.
  - If the proposed well(s) are non-potable the potable attachment is not required.
- The potable attachment is added to your application when you check that a proposed well is potable on page 1 or on page 3.

<b>Submittal Purpose</b>	
Check all that apply	
<input type="checkbox"/> Non-Potable Well(s)	<input checked="" type="checkbox"/> Potable Well(s) Requires Potable Attachments
<input type="checkbox"/> Install one or more new wells with a capacity greater than 70 gallons per minute.	
<input type="checkbox"/> Install one or more new wells with a capacity less than 70 gallons per minute on a high capacity property.	
<input type="checkbox"/> Replace one or more wells with a capacity greater than 70 gallons per minute.	
<input type="checkbox"/> Replace one or more wells with a capacity less than 70 gallons per minute on a high capacity property.	
<input type="checkbox"/> Reconstruct one or more wells with a capacity greater than 70 gallons per minute.	
<input type="checkbox"/> Reconstruct one or more wells with a capacity less than 70 gallons per minute on a high capacity property.	
<input type="checkbox"/> Increase pumping rate in one or more wells to a rate greater than previously approved.	
<input type="checkbox"/> Renew a previous approval that has expired.	
<input type="checkbox"/> Other (please describe: School, WWTP etc.) _____	
<b>Project Description</b>	
Provide a brief description of the proposed project including the number of potable wells to be installed. For non-potable wells include	

<b>High Capacity, School or Well Approval Request</b>	
Form 3300-295 (R 5/15)	
<b>Proposed Well Information</b>	
Enter the following information for all proposed wells on the property. If more than two wells or alterations are proposed, please attach a separate sheet for each well.	
<b>Well Location and Usage</b>	<input checked="" type="radio"/> Potable <input type="radio"/> Non-Potable
Well Name Assigned by Well Owner (North Well, etc.):	
Town/Range/Section:	¼    ¼ S    T    R
Latitude:	
Longitude:	
Water Use Code (e.g. IR10):	
Proposed Maximum Water Usage Per Day in Gallons:	
Proposed Maximum Water Usage Per Month in Gallons:	
Months of Operation (e.g. May - Sept):	
Proposed Pump Type & Capacity(gpm):	



# High Capacity Application

## Page Five – Information and Project Description

- **Potable property information** – Check yes or no for the appropriate questions.
- **Interconnected system** – If the proposed well will be connected to a plumbing system that is supplied by another source, include a schematic drawing of the plumbing system.
- **Non-community system** – Note whether the well will be used for a non-community public water supply system.
- **Variance** – Note whether you are requesting a variance to construct a high capacity well to low capacity standards.
- **Project description** – Describe the project including the planned storage type and volume.

### 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](http://dnr.wi.gov)

### Potable High Capacity Well Attachment

Form 3300-295A (R 5/15)

**Notice:** This attachment is not intended to be used when seeking approval for construction or modification of wells or surface water systems regulated under ch. NR 811, Wis. Adm. Code. Any water system serving 7 or more homes, 10 or more mobile homes, 10 or more apartments, 10 or more condominiums, or 10 or more duplexes is regulated under ch. NR811, Wis. Adm. Code. See NR 811.01 Wis. Adm. Code for applicability requirements.

### Property Information

- | Yes                   | No                    |   |
|-----------------------|-----------------------|---|
| <input type="radio"/> | <input type="radio"/> | Will a proposed well be connected to a plumbing system that is supplied by another water source (other wells, municipal supply, etc.)? <b>If yes include a schematic drawing as described in the potable attachments below.</b>   |
| <input type="radio"/> | <input type="radio"/> | Is a proposed well to be used for a transient non-community or non-transient non-community public water supply system? For water system diagram go to: <a href="http://dnr.wi.gov/topic/DrinkingWater/documents/publicdiagram.pdf">dnr.wi.gov/topic/DrinkingWater/documents/publicdiagram.pdf</a> |
| <input type="radio"/> | <input type="radio"/> | Is a non-pressurized storage vessel proposed? If yes, provide drawings and specifications.  |
| <input type="radio"/> | <input type="radio"/> | Is a pressurized tank with a capacity greater than 1,000 gallons proposed? If yes, provide drawing(s) and specifications.   |
| <input type="radio"/> | <input type="radio"/> | Are you seeking a variance to construct a well that has a capacity of less than 70 gallons per minute to low capacity well construction standards?  |

### Proposed Potable Project Description

For potable wells describe the project, include the type of well (Private, Public, School, WWTP) and note the planned storage type and volume (e.g. 500 gallon pressure tank, 500 gallon bladder tank).



# High Capacity Application

## Page Five – Existing Well Info and Attachments

- **Existing well information** – Provide known information on the construction of potable wells without well construction reports.
- **Potable Attachments** – Provide a sketch map showing potential contamination concerns.
  - A sketch of the plumbing system is needed if more than one well is connected to a common plumbing system.

### Existing Potable Well Information

For existing potable well(s) on the property without a well construction report, provide a description of the known construction information about the well (e.g. 2" unscreened point well drilled in 1950's, 6" sandstone well unscreened).

Note: More information or an inspection of an existing well may be required before approval.

### Potable Attachments

1. Enclose a sketch map showing all of the following that are planned or exist within 300 feet of each proposed potable well: proposed well location; other wells; property boundary; wetlands; potential contamination sources (septic tank and drainfield, petroleum storage tanks, sewer lines, etc.); buildings and north arrow. If there are no pertinent features to map within 300 feet of the proposed well state that on the required property map and plot the well locations.
2. If more than one well is connected to a common plumbing system, also provide a schematic drawing of the system showing method of preventing backflow. This sketch should include the well discharge (pitless, over top of casing sanitary seal); the water line from the well; pressure tanks; sampling faucets; check valves; backflow preventers; air gaps; manually operated valves; water meters; pressure switches for pumps; and any other pertinent fittings. This schematic drawing should also identify which of these components are buried or above ground. If there is more than one check valve within the casing, include in-well check valves on the schematic.







# High Capacity Application Determination of Completeness

- All fields are required.
- Ownership must be correct.
- Coordinates of proposed well must match location given on attached map or aerial photo.
- All existing wells must be listed with coordinates.
- \$500 application fee must be received before review will begin.

Save... Print All Print Second Part Export Raw Data Clear Data

Return completed forms to:  
Wisconsin Department of Natural Resources  
Bureau of Drinking Water & Groundwater - DGWS  
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) Page 1 of 4

Notice: Pursuant to §§ NR 812.00(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 requestors to the extent required by Wisconsin's Open Records law (s. 19.31-19.39, Wis. Stats.).

**Applicant Information**  
Name and Title \_\_\_\_\_  
Company \_\_\_\_\_  
Street Address \_\_\_\_\_  
Phone Number (include area code) \_\_\_\_\_

**Owner Information**  
Name and Title \_\_\_\_\_  
Street Address \_\_\_\_\_  
Phone Number (include area code) \_\_\_\_\_

**Operator Information**  
Name and Title \_\_\_\_\_  
Street Address \_\_\_\_\_  
Phone Number (include area code) \_\_\_\_\_

**Submission Purpose**  
Check all that apply:  
 Non-Potable  
 Is a proposed well  
 Install one or more wells  
 Are you a Wisconsin resident?  
 Replace one or more wells  
 Reconstruct or reconstruct or  
 Increase pump  
 Renew a previous application  
 Other (please specify) \_\_\_\_\_

**Project Description**  
Provide a brief description of the number of acres and currently or plans to be used for \_\_\_\_\_

**Required Enclosure**  
 High Capacity Well  
 \$500 application fee  
 Well Construction

Save... Print All Print Second Part Export Raw Data Clear Data

Return completed forms to:  
State of Wisconsin, Department of Natural Resources  
Bureau of Drinking Water & Groundwater - DGWS  
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) Page 3 of 4

This form is used to request 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 - DGWS  
PO Box 7921  
Madison, WI 53707-7921

**Applicant Information**  
Name and Title \_\_\_\_\_  
Company \_\_\_\_\_

**Owner Information**  
Name and Title \_\_\_\_\_  
Company \_\_\_\_\_

**County** \_\_\_\_\_

**Well Location and Usage**  
 Potable  Non-Potable  Potable  Non-Potable  
 Well Name Assigned by Well Owner \_\_\_\_\_  
 Town/Range/Section: \_\_\_\_\_  
 Latitude: \_\_\_\_\_  
 Longitude: \_\_\_\_\_

**Existing Well(s)**  
Enter the following:  
 Note: Application \_\_\_\_\_

Well Name and/or Number assigned \_\_\_\_\_

**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	Well Name Assigned by Well Owner	Town/Range/Section	Latitude	Longitude	Water Use Code (e.g. IR10)	Proposed Maximum Water Usage Per Day in Gallons	Proposed Maximum Water Usage Per Month in Gallons	Months of Operation (e.g. May - Sept)	Proposed Pump Type & Capacity (gpm)	Discharge Type (Over Top of Casing Seal, Pileless Adapter or Liner)	Discharge Location (Building Pressure Tank, Pond, etc.)	Distance and Direction to Nearest Public Utility Well & Well Name	Distance to Other Potential Contaminant Sources
<input checked="" type="radio"/> Potable		1/4 1/4 S T R											
		1/4 1/4 S T R											

**Well Construction**  
(Using Methods: \_\_\_\_\_)  
 Anticipated Geological Materials and Depths that are expected during drilling: \_\_\_\_\_

**Material and Depth Interval:**  
 Material and Depth Interval: from 0' to ' 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: from 0' to ' from 0' to '  
 Diameter and Depth Interval: from ' to ' from ' to ' \*

**Permanent Casing or Liner Material, If Used:**  
 Diameter and Wall Thickness: " dia " thick from 0' to ' " 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.):**  
 Weight at Depth Interval: lbs/foot 0' to ' 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.):**  
 Screen Size in Inches and Depth Interval or N/A if none: from ' to ' from ' to ' \*

**Annular Space Material Including Filter Pack Material, If Used:**  
 Material and Depth Interval: from ' to ' from ' 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:  Owner  Agent of Owner  
 Signature \_\_\_\_\_ Company \_\_\_\_\_ Date \_\_\_\_\_