

**Mail completed form to:**

Department of Natural Resources  
 Water Use Section – DG/5  
 PO Box 7921  
 Madison, WI 53707-7921

**Water Withdrawal Registration**

Form 3300-267 (R 6/11)

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<http://dnr.wi.gov/org/water/dwg/>

**Notice:** Use of this form is required by the Department to register a new water withdrawal or add a withdrawal to an existing registration. Any person with a water supply system that has the capacity to withdraw water in an amount averaging 100,000 gallons per day or more in any 30-day period is required by s. 281.346(3), Wis. Stats., and ch. NR 856, Wis. Adm. Code, to register the withdrawal with the Department of Natural Resources. Personal information collected will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Open Records Laws (ss. 19.32-19.39, Wis. Stats.).

**Each property must be registered separately.****1. Required Attachment(s)**

Attach an aerial photograph(s) showing the locations of the applicable items listed below (each item listed is explained later in the form). Include labels on the aerial photograph(s) to identify each location requested below and easily identified landmarks like street names. Aerial photographs are available from many sources including the Department's Surface Water Data Viewer (SWDV) found at <http://dnrmaps.wisconsin.gov/imf/imf.jsp?site=SurfaceWaterViewer>.

**1a. For New Registrations**

Attach an aerial photograph(s) showing the following:

- property boundaries
- location of the withdrawal(s)
- location of water use if different than the property
- location of any discharge/return point(s)

**1b. For Adding a New System to an Existing Registration**

Attach an aerial photograph(s) showing the following:

- property boundaries
- location of the new withdrawal(s)
- location of water use if different than the property

**2. Property Owner**

Company Name (If applicable)		Contact First Name	Contact Last Name	
Mailing Address		City	State	ZIP Code
Telephone Number	Extension	E-mail Address		

**3. Operator/Other Contact Information (Complete if different from property owner)**

Company Name (If applicable)		Contact First Name	Contact Last Name	
Mailing Address		City	State	ZIP Code
Telephone Number	Extension	E-mail Address		

**4. Property Information**

Complete the following information about the location of the property where the water is withdrawn and draw the property boundaries on your attached map. Property means all contiguous land controlled by one owner or lessee, or any other person having a possessory interest. Contiguous lands include lands that are bisected by highways or railroad rights-of-way

Identifying name or number, assigned by owner (example, Main Farm Property)		DNR Property Number * (For adding a new source to an existing registration only)		
Street Address		City	State	ZIP Code
County	Township _____ North	Range _____ <input type="checkbox"/> East <input type="checkbox"/> West	Section _____	

\*(This number may be found on previous reporting forms or by contacting DNR Water Use Program Staff. If you do not know the DNR property number, complete the property location information.)

**5. Water Withdrawals and Use**

Complete the following information for each of your water sources that has the capacity to withdraw 100,000 gallons per day (70 gallons per minute) or more. If you are adding additional sources to an existing registration, provide information for the new sources only. A source is an individual location where you withdraw water such as a well or an intake in a lake. Be careful not to count sources twice. For example, if you have a high capacity well that fills a pond and then you irrigate from that pond, you should only record the well. For more than 4 sources, attach additional sheets.

How many total sources do you have on this property that have the capacity to withdraw 100,000 gallons per day or more? \_\_\_\_\_

**5a. GENERAL SOURCE INFORMATION**

	Source 1	Source 2	Source 3	Source 4
<p>Type of source. Select the type of the water source from the list to the right.</p>	<input type="checkbox"/> Well or flowing well Unique Well #, if known: _____ <input type="checkbox"/> Spring <input type="checkbox"/> Lake Michigan or Lake Superior <input type="checkbox"/> River, stream or creek <input type="checkbox"/> Inland lake or pond <input type="checkbox"/> Artificial ditch <input type="checkbox"/> Artificial reservoir or pond <input type="checkbox"/> Other, Specify: _____ _____ _____	<input type="checkbox"/> Well or flowing well Unique Well #, if known: _____ <input type="checkbox"/> Spring <input type="checkbox"/> Lake Michigan or Lake Superior <input type="checkbox"/> River, stream or creek <input type="checkbox"/> Inland lake or pond <input type="checkbox"/> Artificial ditch <input type="checkbox"/> Artificial reservoir or pond <input type="checkbox"/> Other, Specify: _____ _____ _____	<input type="checkbox"/> Well or flowing well Unique Well #, if known: _____ <input type="checkbox"/> Spring <input type="checkbox"/> Lake Michigan or Lake Superior <input type="checkbox"/> River, stream or creek <input type="checkbox"/> Inland lake or pond <input type="checkbox"/> Artificial ditch <input type="checkbox"/> Artificial reservoir or pond <input type="checkbox"/> Other, Specify: _____ _____ _____	<input type="checkbox"/> Well or flowing well Unique Well #, if known: _____ <input type="checkbox"/> Spring <input type="checkbox"/> Lake Michigan or Lake Superior <input type="checkbox"/> River, stream or creek <input type="checkbox"/> Inland lake or pond <input type="checkbox"/> Artificial ditch <input type="checkbox"/> Artificial reservoir or pond <input type="checkbox"/> Other, Specify: _____ _____ _____
<p>Identifying name or number, assigned by owner (example, North Well #1)</p>				
<p>Was this source used before 12/08/2008?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No			

**5b. WITHDRAWAL LOCATION(S)**

Identify the location of each water source listed above **on your attached map**. Make sure to **label** the sources according to the identifying name or number that you assigned as listed above.

**5c. ABOUT THE WITHDRAWAL(S)**

Answer the following questions about each of your water sources. **\*\*The "maximum daily withdrawal capacity" requested below is based upon the maximum physical capacity of the most restrictive component of your water supply system for each source. The most restrictive component of the system will vary from system to system. In general, it is typically the size of the pumping equipment. If the withdrawal is from a spring or flowing well, then it would typically be the rate of maximum flow. For gravity flow surface water sources, it will typically be based on the maximum flow rate through the water control structure or diversion channel.**

	Source 1	Source 2	Source 3	Source 4
<p>Describe the frequency of your water withdrawal? (Note: Continuous means intended to be used uninterrupted through time except for maintenance, etc.)</p>	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent <input type="checkbox"/> Other, Describe	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent <input type="checkbox"/> Other, Describe	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent <input type="checkbox"/> Other, Describe	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent <input type="checkbox"/> Other, Describe
<p>Maximum daily withdrawal capacity in gallons per day. <b>**See explanation in 5c. for more information.</b></p>				
<p>Do you use water from this source outside of your "property"?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No			

If you checked "Yes" to the previous question, identify the other locations where you use the water that are outside of your property on your \_\_\_\_\_

map. Make sure to label these locations as "other places of use".

Is there any other information that you would like to tell us about your water sources?

**6. Water Use (Identify how you use the majority of the water at your property/facility)**

- Public Water Supply.
- Commercial/Institutional. Includes motels, hospitals, restaurants, schools, amusement/water parks, etc.
- Irrigation. Includes agriculture, golf courses, and cranberry operations.
- Livestock. Includes aquaculture.
- Industrial. Includes mining, quarrying, manufacturing of metals, chemicals, paper, food, beverage, etc.
- Power Production
- Other, Includes fish/wildlife, environmental, navigation and water quality purposes.

Describe \_\_\_\_\_

**7. Location of Water Return or Discharge (If you are adding a new source to an existing registration, skip this section.)**

Is a portion of the water withdrawn returned or discharged at a specific location after use?  Yes  No

If "Yes" complete the remainder of section 7. If "No" skip to Section 8.

Where is the water returned or discharged after use?

- Surface water. Identify the location on your map and label "discharge location".
- Public Wastewater Sewer System. Identify the name of the system: \_\_\_\_\_
- Cranberry Operation (For cranberry operations only) - Discharge follows surface water flow pattern.
- Other. Specify: \_\_\_\_\_

(Examples, discharged onto the land surface, injection well)

What is the total amount of water discharged per day (if known) \_\_\_\_\_ GPD

Was this volume  measured or  estimated?

Is there any other information that you would like to tell us about your water return/dischARGE, such as how the discharged amount was calculated or estimated?

**8. Water Use Reporting:**

All persons registered must measure and record the monthly volume of water withdrawn from all sources. Annual reporting of the monthly volumes of withdrawal is required for all high capacity well properties, permitted surface water withdrawals (Ch. 30, Wis. Stats.) and properties that withdrew greater than an average of 100,000 gallons per day in any 30-day period. Annual reporting must be submitted for the previous calendar year by March 1 of the following year.

**9. Certification**

I hereby certify that I am the owner or authorized representative of the owner of the property which is the subject of this Withdrawal Registration. I certify that the information contained in this form and attachments is accurate and complete.

\_\_\_\_\_  
Name of Owner/Authorized Representative  
(Print or Type)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date signed

**\*\*\*Remember to attach the required map to this registration form\*\*\***