



General Permit 6 Field Office Notification Form
Wastewater Discharge from Well Construction and Services

Attention DNR Regional Field Office No. See end of form to view a Field Office Map

Date Faxed:

Purpose of well construction/services:

Proposed construction/services start date:

Anticipated date when discharge will begin:

Estimate of length of discharge: Hours Days

List streams or waterways that may be affected by discharge:

Distance to nearest waterway or conveyance: Feet

Amount of discharge anticipated: GPM GPD

OR

Total Volume of gallons for project

Well Location Information

County:

GP S Location: Latitude Longitude In UTM coordinates

PLS: 1/4 Section Section Township Range E W

Address of well site:

OR, if address is not known

Closest intersection to well site: and

Closest city, town or community:

Well Owner (Permittee) Information If PWS, PWS Name:

PWSID#: DNR Water Use Permit No.: Well ID No.:

Name:

Address:

City: State: Zip:

Telephone Numbers: Daytime: Cell:

Email:

Well Contractor Information

Certification Number:

Company Name:

Certified Contractor Name:

Address:

City: State: Zip:

Telephone Numbers: Daytime: Cell:

Email:

Form completed by: Phone Number:

Where will the Well Water Pollution Prevention Plan (WWPPP) be located?

Please fax the completed form to the appropriate Field Services office within 5 days before well services are started or within 24 hours of start. The fax numbers can be found at the end of this form.

