



Minnesota Department of Natural Resources
Division of Ecological & Water Resources
MNDNR PERMITTING AND REPORTING SYSTEM



Well Construction Assessment Form

Reference Number: 2019-3276

Date Submitted to DNR: October 2, 2019 at 12:10 PM

DNR Lead Hydrologist: Joe Richter
Area: Metro S
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DNR Region: Central Region 3
Address: Minnesota Department of Natural Resources
1200 Warner Road
St. Paul, MN 55106

Parties *(Individuals and Organizations associated with the assessment)*

Empire Builder Investments, Inc - Landowner or Government Unit

Address: 21778 Highview Avenue, Lakeville, MN 55044
Phone: 952-985-7245

David Fellon - Contact *(representing Empire Builder Investments, Inc)*

Address: 21778 Highview Avenue, Lakeville, MN 55044
Phone: 952-985-7245
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Bruce Markgren - Agent
(submitted application)

Address: PO Box 230, Rice Lake, WI 54868-0230
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Proposed Activity

Commercial/Institutional Water Supply

Location and Water Resources



Installation Name: Installation #1

Counties: Dakota
Watersheds: Cannon River
PLS: T112N-R18W-S5 SWSW, T112N-R18W-S5 SESW
UTM: X:498852 Y:4930885
Water Resources: Groundwater

Installation Name: Installation #2

Counties: Dakota
Watersheds: Cannon River
PLS: T112N-R18W-S5 NESW
UTM: X:498969 Y:4931196
Water Resources: Groundwater

Well Construction Assessment Overview

1	What is the main type of work you are proposing to do?	Well assessment
2	If drilled, would this well(s) be connected to an existing system that is already covered by a DNR water appropriation permit?	No
3	Which of the following most accurately describes what you are proposing?	Drilling two or more new wells that will be connected together
4	How many individual wells are you planning to drill at this time?	2
5	What is the maximum desired pumping rate for the entire system (in gpm)?	2600
6	What is the maximum volume of water you think you will need per year (in million gallons), if known? (For example, enter 2,500,000 gallons as 2.5)	500 million gallons per year
7	If you are not the well driller, please provide their name, phone number, and email address. (if known)	unknown
8	What is the county property parcel ID# for the land where the well(s) are proposed to be drilled (enter multiple if applicable)? (if known)	320080029012

Activity Detail

Activity: Commercial/Institutional Water Supply

I don't know how much water I need N/A

Installations (2)

Installation #1 Name: Installation #1 (Well)

1	What is the maximum desired pumping rate (in gpm) for this well?	3,000 gallons per minute
2	What is the water source formation?	Deeper bedrock unit
3	What is the aquifer name? (if known)	Mt. Simon (likely)
4	Counties	Dakota
5	Watersheds	Cannon River
6	PLS	T112N-R18W-S5 SWSW, T112N-R18W-S5 SESW
7	UTMXY	X:498852 Y:4930885
8	Water resources	Groundwater

Installation #2 Name: Installation #2 (Well)

1	What is the maximum desired pumping rate (in gpm) for this well?	3,000 gallons per minute
2	What is the water source formation?	Deeper bedrock unit
3	What is the aquifer name? (if known)	Mt Simon
4	Counties	Dakota
5	Watersheds	Cannon River
6	PLS	T112N-R18W-S5 NESW
7	UTMXY	X:498969 Y:4931196
8	Water resources	Groundwater

Acknowledgment *(By the party who submitted the well assessment)*

Acknowledgement (Continued)



I attest that:

- I own or control (by lease, license, or other permission) the land from which groundwater or surface water will be appropriated, AND
- There are no easements or other restrictions on the land that would prohibit the proposed activities from being authorized under a permit, AND
- I possess the authority to undertake the work described, or I am acting as a duly authorized agent, AND
- The information submitted and the statements made concerning this application are true and correct to the best of my knowledge, AND
- If I drill the proposed well, I will apply for and receive a DNR water use permit prior to pumping.

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