Water Well Driller's Documentation

Well Depth

Method of Drilling

Use of Well

Casing Type

☐ Steel ☐ Threaded Height above
☐ Galv ☐ Welded Surface _____
☐ PVC ☐ Solvent Welded
☐ _____

___in to ___ft Wt ___lb/ft SDR/Sch. No. ____
___in to ___ft Wt ___lb/ft SDR/Sch. No ____
___in to ___ft Wt ___lb/ft SDR/Sch. No. ____

Hole Diameter

___ in. to ___ ft.
___ in. to ___ ft.
___ in. to ___ ft.

Intake Portion of Well AND/OR Filter Pack

☐ Consolidated Formation ☐ Unconsolidated formation
Screen type: or open hole from____ft. to____ft.
☐ Manufactured
Manufacturer _____
Material _____ Dia. _____
Set between____ft and___ft. Slot _____
____ft and___ft. Slot _____
____ft and___ft. Slot _____
Method of installation _____
☐ Well point
☐ Field Perforated Slot size _____ x _____
Slots per foot _____
_____

☐ Filter Pack ☐ No ☐ Yes

Grout
Volume used _____
☐ Neat Cement ☐ Bentonite ☐ _____
Depth from____ft to____ft
from____ft to____ft

Development
Method _____ Duration _____
Dates _____
Chemicals Used _____

Static Water Level Shut-in Pressure:
_____ft ☐ below ☐ above grade
Date Measured _____ _____

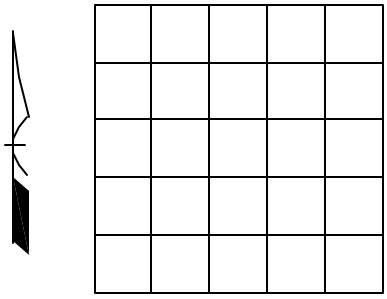
Pumping Water Level
_____ ☐ below ☐ above grade Date _____
After _____ hours pumping at _____ gpm

Pump
Date Installed _____ Type _____
Manufacturer _____ Model No. _____
HP _____ Volts _____ Capacity _____
Depth of pump intake setting _____ No. of stages _____
Power source _____

Nearest Source of Possible Contamination
____ft. Direction _____ Type _____
Disinfection method:

Water Quality
Sample Taken? ☐ Yes ☐ No
Where analyzed? _____

Location Map of Section



Sec. ____ T. _____ R. ___ _____ Meridian

Date well completed _____

DRILLER'S DOCUMENTATION

This information, including the attached well log, is a true and factual record of the completed job. The well has been completed in accordance with Natural Resource Conservation Service specifications and State of Alaska regulations, and a well log report has been submitted as required.

Driller _____

State License # _____

Address _____

Signature _____

Date _____

Appurtenances Installed:
☐ Access Port ☐ Pitless Adaptor
☐ Sanitary Surface Seal
☐ Air Line

COOPERATOR _____
COUNTY _____
JOB CLASS _____

CAD FILE NO. WELL5.DWG
DRAWING NO.
SHEET OF

		Date
Designed		
Drawn		
Checked		
Approved		

U.S.D.A. NATURAL RESOURCES CONSERVATION SERVICE