**ABANDONED WELL PLUGGING RECORD**

**Tax No.**

**Latitude**

**Longitude**

**County**

**Distance & Direction from Road Intersection**

**Well Street Address, City/ZIP**

**Fraction**

<table>
<thead>
<tr>
<th>1/4</th>
<th>1/4</th>
<th>1/4</th>
</tr>
</thead>
</table>

**Section**

**Town No.**

**Range No.**

**Permit No.**

**WSSN & Source ID/Well No.**

**Well Owner**

**Address**

**City/ZIP**

Owner Address Same as Well Address?  Yes No

**Drilling**

Unknown Rotary Cable Tool

**Method**

Other

**Date of Well**

**Well Use**

Household Type I Public Type II Public Type III Public Industrial Irrigation Test Well Heat Pump Other

**Plugging**

**Well Construction Type**

Drift Well Rock Well Dry Hole Unknown Other

**Measured Well Depth**

ft.

**Date Well Constructed**

**Well Construction Type**

Drift Well Rock Well Dry Hole Unknown Other

**Casing Status After Plugging**

ft. Below Grade Above Grade Casing Pulled

**Reason For Abandoning Well**

Public Water Connection Well in Disrepair Well No Longer Needed Dry Hole Uncompleted Well Other

**Abandonment Method**

Pumped Through Grout Pipe Poured From Surface Poured Through Grout Pipe Other

**Pumping Equipment Removed**

Yes No

**Equipment Removed**

Bremer Check Valve Drawdown Seal Drop Pipe Electrical Wiring Packer Pitless Adapter Spool Check Valve Pump Cylinder Pump Rods Stones/Debris Submersible Pump Turbine Pump Bowls Unknown Obstruction Obstruction Driven to Bottom Other

**Casing**

Steel-black Steel-galvanized Plastic Other

**Diameter**

in. to ft. depth

**Diameter**

in. to ft. depth

**Plugging Material (Enter the layers from top to bottom.)**

<table>
<thead>
<tr>
<th>From</th>
<th>To</th>
<th>Quantity</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>ft.</td>
<td>ft.</td>
<td>Bags</td>
<td>Yards</td>
</tr>
</tbody>
</table>

**General Remarks**

**Water Well Contractor’s Certification**

Well Owner Plugged Well

This well was plugged under my supervision and I hereby certify that the work complies with part 127 Act 368 PA 1978 and the well code.

Registered Business Name

Registration No.

Address

City/State/ZIP

Signature of Registered Contractor Date

EQP 2044 (Rev. 5/11)