Attention Owner:
Confidentiality Privilege Notice on reverse side of owner's copy.

Texas Department of Licensing and Regulation

Water Well Driller/Pump Installer Section
P.O. Box 12157 Austin, Texas 78711 Toll free (800)803-9202 (512)334-5540
Email address: water.well@tdlr.texas.gov Web address: www.tdlr.texas.gov

This form must be completed and filed with the department and owner **within 60 days** upon completion of the well.

WELL REPORT

A. WELL IDENTIFICATION AND LOCATION DATA

1) OWNER

Name:	Address:	City:	State:	Zip:

2) WELL LOCATION

County:	Physical Address:	City:	State:	Zip:

Lat.	Long.	GPS Datum	Elevation

3) Type of Work

[ ] New Well [ ] Reconditioning
[ ] Replacement [ ] Deepening
[ ]Other_____

4) Proposed Use (check)

[ ] Monitor [ ] Environmental Soil Boring [ ] Domestic [ ] Industrial [ ] Frac
[ ] Irrigation [ ] Injection [ ] Extraction [ ] De-watering [ ] Testwell [ ] Rig Supply [ ] Stock or Livestock
[ ] Other: [ ] Public Supply --- If Public Supply, were plans approved? [ ] Yes [ ] No

5) Drilling Date

Started _____/_____/_____
Completed _____/_____/_____

Number of identical wells drilled at this location:

6) Diameter of Hole

Dia.(in)	From (ft)	To (ft)

7) Drilling Method (check)

[ ]Driven [ ] Air Rotary [ ] Mud Rotary
[ ] Bored [ ]Air Hammer [ ]Cable Tool [ ] Jetted [ ] Hollow stem Auger
[ ] Reverse Circulation [ ] Other:

8) Borehole Completion

[ ] Open Hole [ ]Straight Wall
[ ] Under-reamed [ ] Filter Packed [ ] Other_____
Filter packed interval from:_____ft. to:_____ft. Size: _____ Type_____

From (ft.)	To (ft.)	Description and color of formation material
		(Use reverse side of Well Owner's copy, If necessary)

9) Casing, Blank Pipe, and Well Screen Data

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc Screen Mfg., if commercial	Setting (ft) From	Setting (ft) To	Gage Casing Screen

10) Annular Seal Data: i.e. (from 0 ft. to 100 ft. 15 sacks of cement)

from: _____ft. to: _____ft. _____ sacks of _____
from: _____ft. to: _____ft. _____ sacks of _____
Method Used:_____Sealed By: _____
Distance to septic field or other concentrated contamination: _____ft.
Distance to Septic Tank:_____ft. Distance to Property Line: _____ft.
Method of Measurement:_____Approved by Variance #:_____

14) Plugged

[ ] Well plugged within 48 hours

Casing left in well: Cement/Bentonite placed in well:

From (ft)	To (ft)	From (ft)	To (ft)	#Sacks or Material used

11) Surface Completion

Completed by Driller? θYes

[ ] Surface Slab Installed [ ] Surface Sleeve Installed
[ ] Pitless Adapter Used [ ] Alternative Procedure Used
[ ] Other [ ] Steel Cased

15) Type Pump

[ ] Turbine [ ] Jet [ ] Submersible [ ] Cylinder
[ ] Other_____
Depth to pump bowls, cylinder, jet etc., _____ft.

12) Water Level

Static level_____ft. Date: _____/_____/_____
Artesian Flow _____gpm Method of Measurement_____

13) Packers:

Type	Depth	Type	Depth

16) Water Test

Type test: [ ] Pump [ ] Bailer [ ] Jetted [ ] Estimated [ ] Other
Yield: gpm with ft. drawdown after hrs.

17) Water Quality

Depth of Strata:_____ Was a chemical analysis made? [ ]Yes [ ] No. Did you knowingly penetrate a strata which contains injurious constituents? [ ]Yes [ ] No
If yes, Type of water_____
Check One: [ ] Naturally poor-quality groundwater – type_____ [ ] Hydrocarbons (i.e. gas, oil, etc.) [ ] Hazardous material/waste contamination encountered
[ ] Other (describe) _____

[ ] *I certify that while drilling, deepening, or otherwise altering the above described well, injurious water or constituents was encountered and the landowner was informed that such well must be completed or plugged in such a manner as to avoid injury or pollution.*

18) Company & Individual's Name: (type or print)

Lic. No.:

Address :	City:	State:	Zip

By signing this well report, you certify that you drilled or supervised the drilling of this well and that each and all of the statements herein are true and correct.

Signature:	/ /	Name:
Licensed Driller/Pump Installer	Date	Unlicensed Assistant (printed)

Additional information or comments:

WELL REPORT CONFIDENTIALITY NOTICE

TEX. OCC. CODE Title 12, Chapter 1901.251, authorizes the owner (owner or the person for whom the well was drilled) to request that information in Well Reports be made confidential. The Department shall hold the contents of the well report confidential and not a matter of public record if it receives, by certified mail, a written request to do so from the owner or the person for whom the well was drilled.

From (ft)	To (ft)	Description and color of formation material