Texas Department of License and Regulation

Water Well Driller/Pump Installer Program

P.O. Box 12157 Austin, Texas 78711 (512)463-7880 FAX (512)463-8616

Email address: water.well@license.state.tx.us

This form must be completed and filed with the department within 30 days following the

			UGGING		ORT		plugging	g of the well.		
	A. WE				LOCATION DA	TA				
1) OWNER Name	NER Address			City			State		Zip	
2) WELL LOCATION	By Page 1									
County	SS		City		Sta	State				
3) Owner's Well No. 4) Type of Well	Long.	 Monitor	Injection	at.	De-Watering	Gi	rid #	5)	ΝÎ	
Drill, Pump Installer, or Landowner p a full scale gridded map available fror placing a corresponding dot in the squ	erforming the plugging n Texas Natural Resou are to the right. The le	g operations narce Informations	nust locate and id on Service. The l on is optional.	entify to	he location of the well w of the well should be do	enoted within the	e grid on he grid by			
	B) HISTORIC	CAL DATA	A ON WELL	TOB	E PLUGGED (if	available)				
6) Driller				License No.						
7) Drilled / /	8) Diameter	8) Diameter of hole			9) Total depth of	well	feet.			
		C. CUI	RENT PLU	GGIN	IG DATA					
10) Date well plugged  12) Name of Driller/Pump Ins  License No.				ing		beside the n	nethod of nt from bo	plugging to	used pp.	
13) CASING AND CEMENTING DATA RELATIVE TO THE PLUGGING OPERATIONS.  CAS ING LEFT IN WELL					Tremmie pipe bentonite from bottom to 2 feet from From surface, cement top 2 feet.					
DIAMETER (inches)	TO (feet)			Pour in 3/8 bentonite chips when standing water in well is less than 100 feet depth, cement top 2 feet.						
					Large di	ameter well ottom.	filled wit	h clay ma	terial from	
CEMENT/BENTONITE PLUG(S) PLACES IN WELL						COMME	ENTS			
FROM (feet) TO (feet)			SACKS							
	D, VALIDA	ATION O	F INFORMA	TION	INCLUDED IN	FORM				
I certify that I plugged this we I understand that failure to co	ell (or the well was mplete items 1 thr	s plugged u ough 13 wi	nder my supe Il result in the	rvisio	n) and that all of the rt(s) being returned	e statements for complet	herein are	e true and submitted	correct.	
Company or individual's Nan	ne (type or print)					Г				
Address		City			State			Zip		
Signature Licensed Driller/Pump Installer		/ D:	/ / Signature Date			Apprentice			ate /	