# WELL ID SHEET FOR PRODUCTION WELL

**DWGPD use only:**

<table>
<thead>
<tr>
<th>Interference Project (I.P.) No.:</th>
<th>USGS map No.:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project No.:</td>
<td>WSID well No.:</td>
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</table>

## A) General Information

1. **Town:**

2. **System name or owner:**

3. **Consultants:**

4. **Consultant’s well No. from report, and report name:**

5. **ANR Well Completion Rpt. No.:**

6. **Driller:**

7. **Driller Lic. No.:**

8. **Date Drilled:**

9. **Source type:**

10. **Source depth:** (ft)

11. **Grout type:**

## B) Step Test

22. **Dates:**

23. **No. steps:**

24. **Step duration:** (min)

25. **Static level:** (ft) date:

26. **Discharge rates:** (gpm)

27. **Max drawdown:** (ft)

28. **Step equation:** \( s = \frac{Q}{Q} = ___ \)

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WELL ID SHEET FOR PRODUCTION WELL (continued)

C) Pump Test ______________________ (hrs)
29. Dates: ___________________________  33. T: __________________________ (sq ft/d)
30. Static level: __________ (ft) date: _______  34. S: ______________________________
32. Max drawdown: ____________________ (ft)  At __________ (min) ______________ (ft)

D) Recovery
36. Dates: ____________________________  38. t/t’ at s=0: __________________________
37. Recovery monitored: ________________ (%)

E) Analysis Used (Circle as appropriate)

F) Source Approval
40. Consultants withdrawal Rate: __________ (gpm)
41. DWGPD Permitted Rate ____________ (gpm)

G) Source Protection
42. Status: ____________________________  43. Source GPS location:
   Lat. ________________________________
44. Well location accuracy: ________________  Long. ______________________________

H) Observation Wells Monitored:

<table>
<thead>
<tr>
<th>Consultants Only:</th>
<th>Distance (ft)</th>
<th>Direction</th>
<th>Drawdown observed (ft)</th>
<th>DWGPD Use</th>
<th>IP No</th>
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<tbody>
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<td>Well ID.</td>
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11/13/2012
The Drinking Water and Groundwater Protection Division (DWGPD) will assign a unique IP number to each approved production well, identify the USGS topographic map number associated with the project, the project file number, and WSID number as applicable.

The applicant must complete the following:

(A) General Information
1. Township that project is located in.
2. System name or well owner.
3. Name of consulting hydrogeologist.
4. Consultant’s well number and title of pump test report.
5. ANR Well Completion Report Number (attach copy)
6. Name of drilling company.
7. Driller’s license number.
8. Date(s) that well was drilled.
9. Source type = well point, dug well, gravel well, bedrock well.
10. Total depth of well below top of casing (BTOC)
11. Type of grout used (or none).
12. Drillers estimated yield.
13. Depth of BTOC of drillers lowest major water bearing fracture.
14. Static level BTOC before testing, and date of measurement.
15. Depth BTOC to pump intake.
16. Rating of permanent pump at installed depth.
17. Depth BTOC to top and bottom of well screen.
18. Hydraulic base used if other than well depth, LWBF, or pump setting. Specify method of determination.
19. Calculated total available head (TAH). Line no. 14 minus either line no. 13, 15, 17, or 18.
20. Indicate line number (13/15/17/18) of data used to determine TAH in line 19.
21. Elevation above mean sea level of ground level at well. May be estimated from topographic map.

(B) Step Test
22. Start and stop dates of step test.
23. Enter as # steps completed/# steps uncompleted (e.g.: 5/1).
24. Length of each step.
25. Static Level BTOC before testing, and date of measurement.
26. List of discharge rates of each step.
27. Maximum drawdown BTOC during step test.
28. Complete step equation.

(C) Pump Test
29. Start and stop dates of pump test.
30. Static Level BTOC before testing, and date of measurement.
31. List of discharge rate(s).
32. Maximum drawdown BTOC during pump test.
33. Calculate transmissivity.
34. Calculate storage coefficient or storativity.
35. Indicate boundary conditions with time and water level BTOC when boundary was reached.

(D) Recovery
36. Start and stop dates of recovery measurements
37. Percent of recovery monitored.
38. Estimate of t/t’ at complete recovery.
WELL ID SHEET FOR PRODUCTION WELL (continued)

Form completion Instructions

(E) Analysis Used
39. Indicate all methods used in pump test analysis.

(F) Source Approval
40. Consultants estimated withdrawal rate based on test results.
41. DWGPD Permitted withdrawal rate to be determined upon review of pump test data.

(G) Source Protection
42. Well protection zone status = 1, Public comment process completed: 2, Public comment process pending.
43. Well location GPS using NAD 83 format.
44. Well location accuracy: 1 = within 1.0 ft.; 2 = within 10.0 ft; 3 = within 100.0 ft.

(H) Observation Wells Monitored (attach additional sheets if needed)
Summerize observation well data in terms of well owner or consultant’s; distance from pumped well; direction from pumped well; and both observed and calculated (design) drawdown. The DWGPD will assign IP numbers. Design conditions assume no recharge and are as follows:
3-day peak = 180 days continuous average pumping rate + 3 days continuous peak pumping rate, or
7 day peak = 180 days continuous average pumping rate + 7 days continuous peak pumping rate.

Note: 7-day peak demand design conditions are applied to developments constructed for the purpose of accessing recreational and resort areas. 3-day peak demand design conditions are applied to all other developments. Peaking duration is evaluated on a case by case basis by the DWGPD.