



MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
OFFICE OF DRINKING WATER AND MUNICIPAL ASSISTANCE
ABANDONED WELL PLUGGING RECORD

Completion is required under authority of Part 127 Act 368 PA 1978.
Failure to comply is a misdemeanor.

Permit No. _____

WSSN & Source ID/Well No. _____

Tax No. _____		Latitude _____		Longitude _____		County _____		Township _____	
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Distance & Direction from Road Intersection	Well Street Address, City/Zip	Fraction 1/4 1/4 1/4			Section	Town No.	Range No.
		Well Owner Address City/Zip Owner Address Same as Well Address? <input type="checkbox"/> Yes <input type="checkbox"/> No					

Drilling Unknown Rotary Cable Tool
Method Other _____

Casing Status After Plugging _____ ft. Below Grade Above Grade
 Casing Pulled

Date of Well Plugging / /
Measured Well Depth _____ ft.

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

Note: Cutting casing off 4 feet below grade is recommended.
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 _____

Date Well Constructed / /
 Unknown

Well Construction Type Drift Well
 Rock Well Dry Hole Unknown
 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
 Clay Tile Crock Other _____
Diameter _____ in. to _____ ft. depth
Diameter _____ in. to _____ ft. depth

Note: Plugging well from bottom up to ground surface is required.

Plugging Material (Enter the layers from top to bottom.)	From	To	Quantity	Units
<input type="checkbox"/> Bentonite Chips/Pellets <input type="checkbox"/> Bentonite Slurry <input type="checkbox"/> Clean Soil Fill <input type="checkbox"/> Concrete <input type="checkbox"/> Neat Cement <input type="checkbox"/> Other _____	_____ ft.	_____ ft.	_____	<input type="checkbox"/> Bags <input type="checkbox"/> Yards <input type="checkbox"/> Other _____
<input type="checkbox"/> Bentonite Chips/Pellets <input type="checkbox"/> Bentonite Slurry <input type="checkbox"/> Clean Soil Fill <input type="checkbox"/> Concrete <input type="checkbox"/> Neat Cement <input type="checkbox"/> Other _____	_____ ft.	_____ ft.	_____	<input type="checkbox"/> Bags <input type="checkbox"/> Yards <input type="checkbox"/> Other _____
<input type="checkbox"/> Bentonite Chips/Pellets <input type="checkbox"/> Bentonite Slurry <input type="checkbox"/> Clean Soil Fill <input type="checkbox"/> Concrete <input type="checkbox"/> Neat Cement <input type="checkbox"/> Other _____	_____ ft.	_____ ft.	_____	<input type="checkbox"/> Bags <input type="checkbox"/> Yards <input type="checkbox"/> Other _____
<input type="checkbox"/> Bentonite Chips/Pellets <input type="checkbox"/> Bentonite Slurry <input type="checkbox"/> Clean Soil Fill <input type="checkbox"/> Concrete <input type="checkbox"/> Neat Cement <input type="checkbox"/> Other _____	_____ ft.	_____ ft.	_____	<input type="checkbox"/> Bags <input type="checkbox"/> Yards <input type="checkbox"/> Other _____
<input type="checkbox"/> Bentonite Chips/Pellets <input type="checkbox"/> Bentonite Slurry <input type="checkbox"/> Clean Soil Fill <input type="checkbox"/> Concrete <input type="checkbox"/> Neat Cement <input type="checkbox"/> Other _____	_____ ft.	_____ ft.	_____	<input type="checkbox"/> Bags <input type="checkbox"/> Yards <input type="checkbox"/> Other _____
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<input type="checkbox"/> Bentonite Chips/Pellets <input type="checkbox"/> Bentonite Slurry <input type="checkbox"/> Clean Soil Fill <input type="checkbox"/> Concrete <input type="checkbox"/> Neat Cement <input type="checkbox"/> Other _____	_____ ft.	_____ ft.	_____	<input type="checkbox"/> Bags <input type="checkbox"/> Yards <input type="checkbox"/> Other _____

General Remarks _____

Water Well Contractor's Certification Well Owner Plugged the Well
This well was plugged under my supervision and this report is complete, true, and accurate to the best of my knowledge and belief.

Registered Business Name _____ Registration No. _____
Address _____
City/State/Zip _____
Signature of Registered Contractor _____ Date _____