



Water Well Construction Report

Complete within 30 days of well completion and send to the appropriate Health Department.

1. Type of Well

- a. **Driven Well:** Casing Diameter _____ in. depth _____ ft.
- b. **Bored Well:** Buried Slab? ☐
- c. **Drilled Well:** PVC Casing Formation Packer set at a depth of _____ ft.
- d. **Drilled Well:** Steel Casing Mechanically Driven? ☐
- e. Hole Diameter _____ in. to _____ ft.; _____ in. to _____ ft.; _____ in. to _____ ft.;
- f. Type of Grout # of Bags Grout Weight From (ft.) To (ft.) Tremie Depth
- | | | | | | |
|--|--|--|--|--|--|
| | | | | | |
| | | | | | |
- g. Well Finished within ☐
- h. Kind of Gravel/Sand Pack Grain Size/Supplier # From (ft.) To (ft.)
- | | | | |
|--|--|--|--|
| | | | |
| | | | |

2. Well Use: ☐
3. Date Well Completed: _____ Well Disinfected? ☐ Driller's Estimated Well Yield _____ gpm
4. Date Permanent Pump Installed: _____ 5. Pump Capacity: _____ gpm Set at (depth) _____ ft.
6. Pitless Adapter Model & Manufacturer: _____ Attachment to Casing: ☐
7. Well Cap Type & Manufacturer: _____
8. Pressure Tank: Working Cycle: _____ gals. Captive Air? ☐ 9. Pump System Disinfected? ☐
10. Name of Pump Company: _____
11. Pump Installer: _____ License # _____
12. _____ Date: _____
- Licensed Pump Installation Contractor Signature

Illinois Department of Public Health
Division of Environmental Health
525 West Jefferson Street
Springfield, IL 62761

IMPORTANT NOTICE: This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under Public Act 85-0863. Disclosure of this Information is Mandatory This form has been approved by the Forms Management Center.



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GEOLOGICAL & WATER SURVEY WELL RECORD

13. Property Owner: _____ Well # _____

14. Driller: _____ License # _____

15. Name of Drilling Company: _____

16. Permit Number: _____ Date Issued: _____

17. Date Drilling Started: _____

18. Well SITE Address: _____

19. Township Name: _____ Land I.D. # _____

20. Subdivision Name: _____ Lot # _____

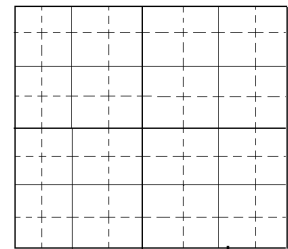
21. Location: a. County

b. Township: _____ Range: _____ Section: _____

c. _____ Quarter of the _____ Quarter of the _____ Quarter

d. GPS: Degrees _____ Minutes _____ Seconds _____ N

Degrees _____ Minutes _____ Seconds _____ W



survey use only

22. Casing and Liner Information

Diameter (in.)

Material, Joint Type

From (ft.)

To (ft.)

23. Is the well screened? ☐

If yes, screen information: Diameter (in.) Length (ft.) Slot Size From (ft.) To (ft.)

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24. Water from _____ at a depth of _____ ft. to _____ ft.

a. static water level _____ ft. below casing which is _____ in. above ground

b. pumping level is _____ ft. pumping _____ gpm for _____ hours

25. Earth Materials Passed Through From (ft.) To (ft.)

(Attach a 2nd page, if necessary)

(If DRY HOLE, fill out log & indicate how hole was sealed.)

26. _____ License # _____

Licensed Water Well Contractor Signature



Water Well Construction Report

Document Routing Procedure:

Original to - **Local Health Department (where permit was issued)** Copy to - **Well Contractor** Copy to - **Homeowner**

The following are explanations for select numbered items from this document:

Additional Information - Water Well Construction Report

1 a-h, 22 and 23 - Identify the type of well constructed and give specifics on the drill hole, casing, liner, packer, screen, grouting and gravel pack for the well. **These are required.**

10 and 15 - Refers to the company doing the construction or maintenance work at the well location.

11 and 14 - Pump Installer and person drilling the well refers to the individual doing the actual work at the well location.

18 - Well Site Address refers to the mailing address at the well location. This may be different than the owner's address.

21b. - Township, Range and Section refer to the Legal Location of the well and can be found on the property documents and within a county plat book. A township direction is either north (N) or south (S) of a baseline and a range direction is either east (E) or west (W) of a principal meridian (see description page in plat book for details).

21 c. - Quarter - Quarter - Quarter Location. **Must be completed.** Each Section within the Legal Location format can be sub-divided into 64 equal portions with each containing 10 acres. When the section is divided into this format, each box is a quarter of one another, and thus the name.

In order to locate a well within its specific quarter/quarter/quarter section, refer to the following description:

The grid guide depicts a one-mile square section divided into the quarter-quarter-quarters. The TOP character should be placed in the FIRST/LEFT QUARTER BLANK (10 acre size), the MIDDLE in the MIDDLE QUARTER BLANK (40 acre size) and the in the BOTTOM/ RIGHT QUARTER BLANK (160 acre size)

A well located in the highlighted area is written as: **NE** Qtr of the **SE** Qtr of the **NW** Qtr

NW NW NW	NE NW NW	NW NE NW	NE NE NW	NW NW NE	NE NE NE	NW NE NE	NE NE NE
SW NW NW	SE NW NW	SW NE NW	SE NE NW	SW NW NE	SE NE NE	SW NE NE	SE NE NE
NW SW NW	NE SW NW	NW SE NW	NE SE NW	NW SW NE	NE SW NE	NW SE NE	NE SE NE
SW SW NW	SE SW NW	SW SE NW	SE SE NW	SW SW NE	SE SW NE	SW SE NE	SE SE NE
NW NW SW	NE NW SW	NW NE SW	NE NE SW	NW NW SE	NE NW SW	NW NE SE	NE NE SE
SW NW SW	SE NW SW	SW NE SW	SE NE SW	SW NW SE	SE NW SE	SW NE SE	SE NE SE
NW SW SW	NE SW SW	NW SE SW	NE SE SW	NW SW SE	NE SW SE	NW SE SE	NE SE SE
SW SW SW	SE SW SW	SW SE SW	SE SE SW	SW SW SE	SE SW SE	SW SE SE	SE SE SE

One square-mile grid

21 d. - Must be completed. Coordinates refer to map projection values. Report GPS coordinates to the nearest 0.1 second.

22 Examples of casing (liner) material and joint type are as follows:

Steel, ASTM A53A - Welded

Steel ASTM A53B - Coupling

PVC, SDR 21, ASTM F480 - Solvent Welded

Note: The above are examples and are not meant to limit the type of description.

Questions regarding the completion of this form should be directed to the local health department where the water well permit was issued or the Illinois Department of Public Health at 217-782-5830, TTY (for hearing impaired only) 800-547-0466.