Abandoned Well Report

Manitoba Natural Resources

WELL LOCATION	QTR. ____ SEC. ____ TWP. ____ RGE. ____ E. ☐ W. ☐ R. LOT ____ PARISH ____ ____ REMARKS ____	LOCATION SKETCH OF WELL
WELL OWNER	NAME ____ ADDRESS ____ PHONE	
WELL IDENTIFICATION (NO., NAME)		
WELL USE	PRODUCTION ☐ TEST WELL ☐ RECHARGE ☐ OBSERVATION WELL ☐	
WATER USE	DOMESTIC ☐ LIVESTOCK ☐ MUNICIPAL ☐ INDUSTRIAL ☐ IRRIGATION ☐ AIR-CONDITIONING ☐ OTHER ☐ Specify ____	
DATE WELL CLOSED	DAY ____ MONTH ____ ____ 19 ____	
ORIGINAL DATE WELL COMPLETED	DAY ____ MONTH ____ ____ 19 ____	

WELL ABANDONMENT

DEPTH BELOW GROUND IN FEET FROM	TO	CASING	OPEN HOLE	SAND	GRAVEL	BENTONITE	CEMENT	CLAY	OTHER	MATERIAL	OTHER

TOP OF CASING OR PITLESS UNIT ____ FEET ABOVE ☐ BELOW ☐ GROUND LEVEL

REMARKS: CONDITION OF WELL, ETC.

ABANDONED WELL SKETCH

CONTRACTOR

LICENCE NO. ____ ____

NAME ____

ADDRESS ____

OPERATOR ____

Signature of Contractor

WELL INFORMATION

SWL ____ ☐ ABOVE GRD ☐ BELOW GRD

CASING SIZE ____

CASING TYPE ____

CASING CUT OFF AT ____

____ BELOW GRD.

MG-2435 (Rev. 97)

CONTRACTOR'S COPY