Abandoned Well Report

Manitoba Natural Resources

WELL LOCATION	QTR. ____ SEC. ____ TWP. ____ RGE. ____ E. ☐ W. ☐ R. LOT ____ PARISH _____ ____ REMARKS _____
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 ____

LOCATION SKETCH OF WELL

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)

WATER RESOURCES BRANCH COPY