



MISSOURI DEPARTMENT OF NATURAL RESOURCES  
MISSOURI GEOLOGICAL SURVEY  
**PUBLIC WELL/HIGH YIELD REPORT**

| FOR OFFICE USE ONLY |               |
|---------------------|---------------|
| REF. NO.            | DATE RECEIVED |
| STATE CERT. NO.     | CR NO.        |

|   |          |      |  |                                 |           |             |
|---|----------|------|--|---------------------------------|-----------|-------------|
| ROUTE<br>/ /  | APPROVED | DATE | ENTERED  | PWS ID                          | CHECK NO. | REVENUE NO. |
| NAME OF BUSINESS, FACILITY OR SITE THE WELL SERVES (REQUIRED) |          |      | PHYSICAL ADDRESS OF THE PROPERTY WHERE WELL IS LOCATED |                                 |           | CITY        |
| WELL OWNER OR FACILITY CONTACT NAME                           |          |      |  | TELEPHONE NUMBER WITH AREA CODE |           |             |
| WELL OWNER MAILING ADDRESS                                    |          |      |  | CITY                            | STATE     | ZIP CODE    |

**SEE BACK OF FORM FOR WELL CLASSIFICATIONS**

|   |  |
|---|--|
| TYPE OF WELL<br><input type="checkbox"/> PUBLIC SUPPLY WELL (APPROVAL MUST BE OBTAINED IN ADVANCE BY DNR REGIONAL OFFICE)*<br><input type="checkbox"/> HIGH YIELD BEDROCK WELL (YIELD >70 GPM MUST HAVE CASING DEPTH DETERMINED BY WELLHEAD PROTECTION SECTION)*<br><input type="checkbox"/> HIGH YIELD UNCONSOLIDATED MATERIAL WELL<br><input type="checkbox"/> OPEN LOOP HEAT PUMP (YIELD >70 GPM MUST HAVE CASING DEPTH DETERMINED BY WELLHEAD PROTECTION SECTION)*<br><input type="checkbox"/> SUPPLY WELL <input type="checkbox"/> RETURN WELL | *ATTACH COPY OF THE CASING DEPTH LETTER<br>DNR VARIANCE NUMBER (IF ISSUED) |
|---|--|

**CASING AND SCREEN INFORMATION**

|  |                         |  |  |   |   |
|--|-------------------------|--|--|---|---|
| LENGTH<br>FT.  | OUTSIDE DIAMETER<br>IN. | WEIGHT (LB), SDR#, SCH#  | BOREHOLE DIAMETER<br>IN.                             | MATERIAL<br><input type="checkbox"/> STEEL <input type="checkbox"/> PLASTIC | DRIVE SHOE USED<br><input type="checkbox"/> YES <input type="checkbox"/> NO |
| SURFACE CASING (IF USED)<br>LENGTH<br>OUTSIDE DIAMETER |                         | SURFACE CASING GROUTED<br><input type="checkbox"/> YES <input type="checkbox"/> NO | SCREEN LENGTH (UNCONSOLIDATED MATERIAL WELLS)<br>FT. | SCREEN TYPE / SLOT SIZE / PACKER DEPTH                                      |   |

**CASING GROUT INFORMATION**

|  |  |  |  |   |
|--|--|--|--|---|
| POSITION OF SEAL<br><input type="checkbox"/> FULL LENGTH<br><input type="checkbox"/> TOP | GROUT TYPE (CHOOSE ONE)<br><b>CEMENT</b><br><input type="checkbox"/> TYPE I <input type="checkbox"/> TYPE III<br><b>BENTONITE</b><br><input type="checkbox"/> CHIPS <input type="checkbox"/> PELLETS <input type="checkbox"/> SLURRY | NUMBER OF SACKS USED _____<br>LBS PER SACK _____<br>OR CUBIC YARDS _____ | METHOD OF GROUT INSTALLATION<br><input type="checkbox"/> PRESSURE THRU CASING<br><input type="checkbox"/> PRESSURE THRU TREMIE<br><input type="checkbox"/> TREMIE <input type="checkbox"/> GRAVITY | DRILLING SUSPENDED<br><input type="checkbox"/> NO<br><input type="checkbox"/> YES _____ HRS |
|--|--|--|--|---|

**LINER INFORMATION**

|   |  |   |  |   |
|---|--|---|--|---|
| LENGTH<br>FT.   | OUTSIDE DIAMETER<br>IN.  | MATERIAL<br><input type="checkbox"/> STEEL <input type="checkbox"/> PLASTIC | WEIGHT (LB), SDR#, SCH#  | USE (CHOOSE ONLY ONE)<br><input type="checkbox"/> HOLD BACK FORMATION <input type="checkbox"/> PREVENT RUST<br><input type="checkbox"/> SEAL OUT UNDESIRABLE CONDITIONS |
| POSITION OF SEAL<br><input type="checkbox"/> FULL LENGTH<br><input type="checkbox"/> BOTTOM | GROUT TYPE (CHOOSE ONE)<br><b>CEMENT</b><br><input type="checkbox"/> TYPE I <input type="checkbox"/> TYPE III<br><b>BENTONITE</b><br><input type="checkbox"/> CHIPS <input type="checkbox"/> PELLETS <input type="checkbox"/> SLURRY | NUMBER OF SACKS USED _____<br>LBS PER SACK _____                            | METHOD OF GROUT INSTALLATION<br><input type="checkbox"/> GRAVITY <input type="checkbox"/> TREMIE<br><input type="checkbox"/> AS LINER IS INSTALLED | PACKER DEPTHS<br>____ / ____ / ____ FT.   |

|  |  |                       |   |               |                              |  |
|--|--|-----------------------|---|---------------|------------------------------|--|
| DEPTH<br>FROM    TO  |  | FORMATION DESCRIPTION | LOCATION OF WELL OR PUMP<br>LAT. _____ ' _____ ' _____ "<br>LONG. _____ ' _____ ' _____ "<br>_____ ° _____ ' _____ "<br>SEC _____ TWP _____ N RNG _____ <input type="checkbox"/> E <input type="checkbox"/> W |               | COUNTY                       | ABANDONED WELL ON SITE<br><input type="checkbox"/> YES <input type="checkbox"/> NO |
|  |  |                       |   |               | DRILL AREA (OFFICE USE ONLY) | WAS THE WELL PLUGGED<br><input type="checkbox"/> YES <input type="checkbox"/> NO   |
|  |  |                       |   |               | WELL COMPLETION DATE         |  |
|  |  |                       |   |               |                              |  |
|  |  |                       | <b>GROUNDWATER INFORMATION</b>  |               | <b>PUMP INFORMATION</b>      |  |
|  |  |                       | WELL YIELD _____ GPM  |               | PUMP INSTALLATION DATE       |  |
|  |  |                       | STATIC WATER LEVEL _____ FT.  |               | DEPTH PUMP SET _____ FT.     |  |
|  |  |                       | DEPTH TO FIRST GROUNDWATER _____ FT.  |               | PUMP RATE _____ GPM          |  |
| I HEREBY CERTIFY THE WELL/PUMP INFORMATION HEREIN DESCRIBED IS IN ACCORDANCE WITH THE DEPARTMENT OF NATURAL RESOURCES REQUIREMENTS. (ALL FIELDS MUST BE COMPLETED BUT ONLY ONE SIGNATURE IS REQUIRED.) |  |                       |   |               |                              |  |
| PRIMARY CONTRACTOR (IF DIFFERENT THAN INSTALLATION CONTRACTOR)   |  |                       |   | PERMIT NUMBER | DATE                         |  |
| WELL INSTALLATION CONTRACTOR   |  |                       |   | PERMIT NUMBER | DATE                         |  |
| PUMP INSTALLATION CONTRACTOR   |  |                       |   | PERMIT NUMBER | DATE                         |  |
| WELL INSTALLATION CONTRACTOR APPRENTICE (IF APPLICABLE)  |  |                       |   | PERMIT NUMBER | DATE                         |  |
| TOTAL DEPTH _____ FT.  |  |                       | PUMP INSTALLATION CONTRACTOR APPRENTICE (IF APPLICABLE)   |               | PERMIT NUMBER                | DATE   |
| DEPTH TO BEDROCK _____ FT.   |  |                       |   |               |                              |  |

## TYPES OF WELLS

**Public Water System** – A system for provision to the public of piped water for human consumption if this system has at least 15 service connections or regularly serves an average of at least 25 individuals daily at least 60 days out of the year. This system includes any collection, treatment, storage or distribution facilities used in connection with the system.

A public water system is either a community water system, transient noncommunity water system or nontransient noncommunity water system. All community or noncommunity public water supply wells must be constructed according to Missouri Public Drinking Water rules.

A **Community Water System** is a public water system that serves at least 15 service connections or regularly serves an average of at least 25 residents on a year-round basis.

A **Transient Noncommunity Water System** is a public water system that is not a community water system with at least 15 service connections or regularly serves an average of at least 25 individuals daily at least 60 days of the year.

A **Nontransient Noncommunity Water System** is a public water system that is not a community water system, with at least 15 service connections or regularly serves at least 25 of the same persons over six (6) months of the year.

All wells that serve public water systems must be approved in advance of drilling by a Department of Natural Resources' Regional Office. All public water systems must have a construction permit for well and system construction, before the start of construction, and another permit for dispensing of water.

**Note:** Rules specify the number of connections and the number of people to be served to be considered a public system. Since Missouri residences average three people, the number of connections allowed for a multifamily well is usually limited to eight connections not 15 connections. Unless site specific population data is presented, a well with more than eight connections will be considered to be a public well.

**High Yield Bedrock or Unconsolidated Material Well** – Water supply wells constructed to meet required standards and are equipped with a pump with the capacity to produce more than 70 gallons of water per minute. See 10 CSR 23-3.030 for construction requirements.