Well Number: *(FOR CONTRACTOR’S USE)*

This report must be submitted to the N.H. Water Well Board no later than 90 days after the well was decommissioned.

State of New Hampshire
Water Well Board
PO Box 95
Concord, NH 03302-0095
603-271-1974

Abandoned Well
Registration Report

<table>
<thead>
<tr>
<th>Well Owner:</th>
<th>Mailing Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building Contractor:</td>
<td>Mailing Address:</td>
</tr>
</tbody>
</table>

Location of Well (# & Street, Town):

Subdivision Name:  Subdivision Lot #:

Town Tax Map and Lot #:

Type of Well:  □ Drilled in Bedrock  □ Drilled in Gravel  □ Dug  □ Wash/Point

Use Type:  □ Domestic  □ Public  □ Irrigation  □ Commercial  □ Monitoring

Reason for Abandonment:  □ Insufficient Yield  □ Poor Aesthetic Quality  □ Contaminated  □ Disrepair  □ Failed Well  □ Isolation Distances  □ No Longer In Use  □ Other:

Current Status:  □ Decommissioned  □ Not Decommissioned  □ Wellhead Left Above Grade and Covered

Date Well was Decommissioned:

Depth of Well:  ft.  Static Water Level:  ft. below land surface

Casing: Length:  ft.  Diameter:  in.  Material:

Method Used for Sealing:  □ Filled with Grout  □ Pressure Grout

Quality of Materials Used (List No. of Units):  □ Neat Cement:  □ Cement/Bentonite Grout:
□ Premixed Bentonite Grout:  □ Bentonite Chips:  □ Other:

Doing Business As: ______________________________________

Report Filed by (Please sign): ______________________________________

Date of Report: ______________________________________