



**State of New Hampshire  
Water Well Board**

PO Box 95  
Concord, NH 03302-0095  
603-271-1974



**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.

**Abandoned Well  
Registration Report**

Identification #: \_\_\_\_\_  
Latitude: \_\_\_\_\_  
Longitude: \_\_\_\_\_  
Please Report Coordinates in:  
Map Datum: WGS 84  
Position Format: hddd°mm.mmm

Well Owner:		Mailing Address:	
Building Contractor:		Mailing Address:	
Location of Well (# & Street, Town):			
Subdivision Name:		Subdivision Lot #:	
Town Tax Map and Lot #:			
Type of Well: <input type="checkbox"/> Drilled in Bedrock <input type="checkbox"/> Drilled in Gravel <input type="checkbox"/> Dug <input type="checkbox"/> Wash/Point			
Use Type: <input type="checkbox"/> Domestic <input type="checkbox"/> Public <input type="checkbox"/> Irrigation <input type="checkbox"/> Commercial <input type="checkbox"/> Monitoring			
Reason for Abandonment: <input type="checkbox"/> Insufficient Yield <input type="checkbox"/> Poor Aesthetic Quality <input type="checkbox"/> Contaminated <input type="checkbox"/> Disrepair <input type="checkbox"/> Failed Well <input type="checkbox"/> Isolation Distances <input type="checkbox"/> No Longer In Use <input type="checkbox"/> Other:			
Current Status: <input type="checkbox"/> Decommissioned <input type="checkbox"/> Not Decommissioned <input type="checkbox"/> 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: <input type="checkbox"/> Filled with Grout <input type="checkbox"/> Pressure Grout			
Quality of Materials Used (List No. of Units): <input type="checkbox"/> Neat Cement: <input type="checkbox"/> Cement/Bentonite Grout: <input type="checkbox"/> Premixed Bentonite Grout: <input type="checkbox"/> Bentonite Chips: <input type="checkbox"/> Other:			

Doing Business As: \_\_\_\_\_

Report Filed by (Please sign): \_\_\_\_\_

Date of Report: \_\_\_\_\_