



Arizona Department of Water Resources
 Groundwater Permitting and Wells Section
 1802 W Jackson St. Box 79 Phoenix, AZ 85007
 (602) 771-8527 • www.azwater.gov

Project Completion Report for Mineral Exploration Drilling

- ❖ Review instructions prior to completing form in black or blue ink.
- ❖ This report should be prepared by the well owner or exploration firm in detail and filed with the Department within 30 days following completion of the project as a whole.

FILE NUMBER
WELL REGISTRATION NUMBER 55 -

**** PLEASE PRINT CLEARLY ****

SECTION 1. LOCATION OF WELL						
WELL LOCATION ADDRESS (IF ANY)						
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	
			¼	¼	¼	

SECTION 2. OWNER INFORMATION	SECTION 3. DRILLING AUTHORIZATION	
Well Owner	Drilling Firm	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	NAME	
MAILING ADDRESS	DWR LICENSE NUMBER	
CITY / STATE / ZIP CODE	TELEPHONE NUMBER	FAX
CONTACT PERSON NAME AND TITLE		
TELEPHONE NUMBER	FAX	

SECTION 4.			
DATE DRILLING PROJECT STARTED	DATE DRILLING PROJECT COMPLETED	NUMBER OF HOLES	MAXIMUM DEPTH OF BORING ft. below land surface
Casing (if installed)		Geologic Log of Well	
OUTER DIAMETER (inches)	MATERIAL (T)		
	STEEL	PVC	ABS
	DESCRIBE IF OTHER TYPE,		
	CHECK ONE		
	<input type="checkbox"/> Unconsolidated Formation		
	<input type="checkbox"/> Consolidated Formation:		
	STATIC WATER LEVEL (IF ENCOUNTERED OR DETECTED)		
	Feet Below Land Surface		

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (if abandoned)																
Casing Treatment (if applicable)							Sealing or Fill Material									
DEPTH FROM SURFACE		TREATMENT TYPE (T)					DEPTH FROM SURFACE		MATERIAL TYPE (T)					MIXING RATIO by (check one) <input type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)	
		SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS THAT WERE ADDED			NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT			HIGH SOLIDS BENTONITE
FROM (feet)	TO (feet)					FROM (feet)	TO (feet)									

REMARKS

I state that this report is filed in compliance with A.A.C. R12-15-817(C) and is complete and correct to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE	SIGNATURE OF WELL OWNER OR EXPLORATION FIRM	DATE
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