Well Registration Form

To register your well, please complete the following information. The information provided will be added to the Provincial WELLS Database, which is accessible free of charge to the public at http://a100.gov.bc.ca/pub/wells/public/.

Owner Information

Owner Name:_______________________________________________________________________________

Mailing Address: ________________________Town______________________Prov.____Postal Code_______

Email Address:__________________________________________Phone No.:___________________________

Well Location Information

If the address of the well location is the same as above, please check [ ]

Address:____________________________________________Town__________________________________

Legal description (available from the property tax assessment notice):

<table>
<thead>
<tr>
<th>Lot:</th>
<th>Block:</th>
<th>Range:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plan:</td>
<td>Section:</td>
<td>Land District:</td>
</tr>
<tr>
<td>District Lot:</td>
<td>Township:</td>
<td>PID:</td>
</tr>
</tbody>
</table>

Description of well location on the property _______________________________________________________
__________________________________________________________________________________________

Please provide or attach a sketch or picture of where the well is located on your property relative to the road and any other structures.

Example Sketch
GPS Coordinates of the Well

Coordinates for the well can be determined by using a GPS unit or by using a mapping application such as Google Earth.

Latitude (e.g., 49.20184°): __________________________

Longitude (e.g., 122.58376°): _________________________

OR

UTM Zone (NAD83): ______  UTM Easting: ________________  UTM Northing: ________________

Source of coordinates (check one): GPS [ ]  Google Earth [ ]  Other (please specify) [ _____________ ]

Well Information

If the well construction report is available, please attach to this form.

Well Identification Plate Number (steel plate attached to some wells): __________________________

Description of where on the well the plate is attached (usually attached to the well casing or well cap): ____________

Date well drilled (YYYY/MM/DD): __________________________ Is this the ☐ exact date or an ☐ approximate date?

Drilling Company: ____________________________________________

Method of Drilling: ☐ Drilled  ☐ Excavated or Dug

Water Use: ☐ private domestic  ☐ water supply system*  ☐ irrigation  ☐ commercial or industrial
☐ Geothermal ( ☐ Open Loop or ☐ Closed Loop)  ☐ Other (please specify) ____________________________

* Please note that wells that are for the purpose of supplying a water supply system are required to complete a Schedule 2 Report Form, which can be obtained from the email provided below.

Well depth (ft): __________  Well Diameter (in): __________

Casing Stick up (in): __________  Static Water Level (ft): __________

Approximate Well Yield (USGPM): __________  Pumping Rate (USGPM): __________

Send Completed Forms To

Mailing Address: Ground Water Data Specialist
                 Ministry of Environment
                 PO Box 9362 Stn Prov Govt
                 Victoria BC  V8W 9M2

Email: GroundWater@gov.bc.ca