Water Well Information and Complaint Questionnaire

Instructions

Note: All data submitted becomes public information. If a new well is drilled, do NOT seal the old well until investigation is complete.

Parts B, C, and D must be completed by a licensed well driller or the complaint will not be validated and the questionnaire will be returned.

Part A: To be completed by the complainant.
Part B & C: To be completed by a licensed well driller. Information should describe the well for which the complaint is being made.
Part D: To be completed by the complainant and a licensed well driller.
Part E: To be completed by the complainant.

NOTE: Omission of any data requested will delay the processing of the complaint and may result in its dismissal. Specific additional information on the complaint may be required upon notification.

MAILING: Submit the completed water well information and complaint questionnaire to the appropriate DNR Regional Office for your county.

REGION 1 - Northwest Minnesota
2115 Birchmont Beach Rd NE
Bemidji, MN 56601
Nathan Kestner - Regional Manager
Phone (218) 308-2626
Fax (218) 755-4066

REGION 2 - Northeast Minnesota
1201 East Highway 2
Grand Rapids, MN 55744
Darrell Schindler - Regional Manager
Phone (218) 327-4417
Fax (218) 327-4243

REGION 3 - Central Minnesota
1200 Warner Road
St. Paul, MN 55106
Dan Lais - Regional Manager
Phone (651) 259-5766
Fax (651) 772-7977

REGION 4 - Southern Minnesota
261 Highway 15 South
New Ulm, MN 56073-8915
Korey Woodley - Regional Manager
Phone (507) 359-6050
Fax (50) 359-6018
**DEPARTMENT OF NATURAL RESOURCES**

**WATER WELL INFORMATION**

**PART A  WELL LOCATION**

- Owner's Name
- Authorized Agent
- Mailing Address
- Telephone Number
- Home ( ), Work ( ), Cell ( )
- Email Address
- GPS Coordinates
- County
- Township Name
- Township No.
- Range
- Section
- Fraction
- Place an "X" on the grid showing the exact location of your well. The grid is one section (640 acres divided into 1/4, 1/4, 1/4 sections). (1600, 40, 10 acres). Attach a map or aerial photograph indicating the location of well(s). 

**PART B  Describe the well with water problems**

- Name of Company which drilled well:
- Date Completed
- Drilled Depth
- Present Depth
- MATERIAL: Height Above (Below) Land Surface: ft
- Interval: from
- DRILLING METHOD: (if known)
- SCREEN: Diameter: inches
- Length: feet
- Make: Or open hole from to ft
- Type
- Slot/Gage
- Length:
- Set between ft
- METHOD: From to feet
- FITTINGS:
- TYPE:
- Age: years
- Pumping Rate: gpm
- SCREEN (if one exists):
- Pump Setting-submersible (Below Ground Level): in
- ft
- Drop Pipe Length--non-submersible (Below Ground Level): ft
- PUMP:
- Incrusted
- Rusted/Corroded
- Other
- DROP PIPE:
- Water Marks
- Holes/Cracks
- DISTRIBUTION:
- Plugged Lines
- Vacuum in Lines
- OTHER:
- Pump Setting--non-submersible
- Drop Pipe Length--non-submersible
- Depth below Land Surface: ft
- Method of measurement (steel tape, etc.)

**PART C  WELL CONDITION**

- CASING:
  - Filled with Sediments
  - Cracked
  - Incrusted
  - Holes
  - Other
  - Comment

- SCREEN (if one exists):
  - Incrusted
  - Rusty/Corroded
  - Plugged
  - Other
  - Comment

- PUMP:
  - Incrusted
  - Rusty/Corroded
  - Other
  - Electrical
  - Other
  - Comment

- DROP PIPE:
  - Rusty/Corroded
  - Holes/Cracks
  - Water Marks
  - Other
  - Comment

- DISTRIBUTION:
  - Plugged Lines
  - Vacuum in Lines
  - Other
  - Comment

**PART D  SIGNATURES**

- Well Owner or Agent: __________
- Date: __________
- Driller: __________
- Address: __________
- Phone: __________
- Does this well comply with the MN Health Department Water Well Construction Code? _____ Yes, ____ No
- If not, why not?
- Date: __________
PART E  COMPLAINT QUESTIONNAIRE

Please answer the following questions by providing as much information as possible. Attach any documents involved, such as receipts, worklists, bids, water level measurements, observation or related investigative information, etc.

1) Describe the problem:

2) Indicate the number of people, livestock and other type(s) of water use supplied by the well(s):

3) Suspected cause of the problem:

4) Have you contacted well owner(s) whose well(s) you suspect might be affecting yours? Explain (provide their name, address and phone number)

5) Past well problems? (when and what was the problem?):

6) Describe any maintenance that has been done on this well:

7) Have you corrected the problem? Explain:

8) How do you feel this problem can be fairly resolved? (if possible, attach a list of work, materials, and costs needed to resolve the problem)

9) Have you complained before? When? To whom?

10) General Comments: