

**Environmental Division  
Technical Staff Review  
Ground Water Well Prior Notification Form Evaluation Checklist**

GWR ID No. \_\_\_\_\_

Date Issued \_\_\_\_\_

Note: A GWR ID Number is issued only after the notification form has been determined by technical staff to be both administratively and technically complete and the form data has been entered into SONRIS.

1. Is the proposed well located in an area where agency restrictions or other permitting requirements or restrictions may exist and apply?

a. Area of Groundwater Concern (AGC)

i. Is the location of the proposed well within an Office of Conservation area of ground water concern?

Yes \_\_\_\_\_, AGC ID: \_\_\_\_\_ No \_\_\_\_\_

ii. If yes to question 2.a.i., then is the location of the proposed well within an Office of Conservation critical area of ground water concern?

Yes \_\_\_\_\_ No \_\_\_\_\_ N/A \_\_\_\_\_

b. Is the proposed water well located within one of the Capital Area Groundwater Conservation Commission parishes?

Yes \_\_\_\_\_ No \_\_\_\_\_

c. Is the proposed location of the water well within the geographical area of any local or parish drinking water protection ordinances listed and delineated by the DEQ Aquifer Evaluation Program?

Yes \_\_\_\_\_ No \_\_\_\_\_

i. If yes, identify the ordinance(s): \_\_\_\_\_

ii. If yes, is the proposed well type (use) restricted by the ordinance(s)?

Yes \_\_\_\_\_ No \_\_\_\_\_

d. Following review of the Source Water Assessment Program areas (SWAP)/Wellhead Protection area database on SONRIS GIS, is the location of the proposed water well within a SWAP/Wellhead Protection area?

Yes \_\_\_\_\_ No \_\_\_\_\_

i. If yes, list SWAP/Wellhead Protection Area(s) ID \_\_\_\_\_  
\_\_\_\_\_

Document findings for 1.a, b, c or d in well file and note possible restrictions, as applicable (also include any correspondence with other agencies).

Comments (Provide attachment if needed):  
\_\_\_\_\_

2. Using available USGS, DEQ, and DHH/OPH databases and other resources, are there any regional or local ground water related issues or immediate effects reported in the area of the proposed well location such as the following?

a. Salt Water Encroachment

i. Is salt water encroachment a documented problem for this area?

Yes\_\_\_\_\_ No\_\_\_\_\_

ii. If yes, then explain and provide supportive documentation in file:

\_\_\_\_\_  
\_\_\_\_\_

Comments (Provide attachment if needed): \_\_\_\_\_  
\_\_\_\_\_

b. Water Level Decline

i. Are there documented water level decline problems in this area?

Yes\_\_\_\_\_ No\_\_\_\_\_

ii. If yes, then explain and provide supportive documentation in file:

Comments (Provide attachment if needed): \_\_\_\_\_  
\_\_\_\_\_

c. Land Subsidence

i. Has the Office of Conservation received any reports of land subsidence for this area?

Yes\_\_\_\_\_ No\_\_\_\_\_

ii. If yes, then explain and provide supportive documentation in file:

\_\_\_\_\_  
\_\_\_\_\_

d. Groundwater Contamination

i. Are there any DOTD registered monitoring wells within ¼ mile of the proposed water well location?

Yes\_\_\_\_\_ No\_\_\_\_\_

ii. If yes, then explain and provide supportive documentation in file:

\_\_\_\_\_  
\_\_\_\_\_

iii. Are there any published DEQ or DHH reports of groundwater contamination or public drinking water supply notices for this area?

Yes\_\_\_\_\_ No\_\_\_\_\_

- iv. If yes, then report any restrictions and provide supportive documentation in file:

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Comments (Provide attachment if needed): \_\_\_\_\_

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3. Based on a search of DNR-OC / DOTD databases to identify all registered wells screened in the target aquifer zone, are there potential well interference issues within ¼ mile radius of proposed well location?

- a. Considering the proposed production, does the proposed well spacing present the potential for adverse effects on nearby registered water wells?

Yes \_\_\_\_\_ No \_\_\_\_\_

- i. If yes, then explain and provide supportive documentation in file:

- b. Do aerial maps of the nearby surrounding area of the proposed well location show structures that may have unregistered water wells?

Yes \_\_\_\_\_ No \_\_\_\_\_

- i. If yes, then explain and provide supportive documentation in file:

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- c. Do published geologic water resources bulletins or oil and gas electric logs show hydraulic connectivity between different zones or geologic formations within the aquifer in which the proposed water well is to be screened? Check Not Applicable (NA) if different zones or geologic formations do not exist.

Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_

- d. Do published geologic water resources bulletins or available oil and gas electric logs show hydraulic connectivity between different fresh water aquifers located in the area surrounding the proposed water well under evaluation? Check Not Applicable (NA) if different fresh water aquifers are not located in the area under evaluation.

Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_

If potential well interference issues are identified above, predict / project effect of proposed well use on existing wells located within ¼ mile. Run MODFLOW model or use other acceptable drawdown calculations.

Document findings, including DOTD ¼ mile well listing in well file and, if applicable, any modeling or drawdown calculation results.

Comments (Provide attachment if needed):

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4. Overall and based on the findings of items 1, 2 and 3, does the potential for adverse effects on nearby registered water wells exist?

Yes \_\_\_\_\_ No \_\_\_\_\_

Comments (Provide attachment if needed):

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5. Overall and based on findings of items 1, 2 and 3, does the potential exist for adverse impacts to the sustainability of the aquifer from which the proposed well is to produce?

Yes \_\_\_\_\_ No \_\_\_\_\_

Comments (Provide attachment if needed):

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6. If the answer to either 4. or 5. above is yes, request the well owner to provide a Ground Water Use Impact Study on potential effects on surrounding wells and aquifer sustainability. Review study for acceptance as basis for agency decision.

- a. Was study provided?

Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_ Date Study Requested \_\_\_\_\_

b. Was study acceptable? Date Study Received \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_ Date Study Review Completed \_\_\_\_\_

If yes to both 6.a. and b., accept study, include in well file and conclude evaluation. If no study was provided or if it is unacceptable, conclude evaluation with recommendations to place restrictions, limit production, require well relocation, etc. in accordance with statutory and regulatory requirements. Document findings in well file.

Comments (Provide attachment if needed):

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7. Based on the evaluation, provide suggested recommendations and briefly summarize the main reason(s) supporting that suggestion (e.g., "There are no concerns with regard to the proposed installation and operation of this well, as no potential well interference issues have been identified within the proposed well location ¼ mile radius target zone, and no documented connectivity of zones within aquifer in this area."). Provide attachment if needed.

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Reviewer \_\_\_\_\_ Date Reviewed \_\_\_\_\_