E-MAIL UPON COMPLETION TO: gwater@la.gov OR MAIL ORIGINAL TO:

Louisiana Dept. of Natural Resources Attn: Ground Water Resources P.O. Box 94275 Baton Rouge, LA 70804-9275

LOUISIANA DEPARTMENT OF NATURAL RESOURCES OFFICE OF CONSERVATION, ENVIRONMENTAL DIVISION WATER WELL REGISTRATION SHORT FORM (DNR-GW-1S)

DNR WELLS ONLINE ACCESS:

- 1) Go to http://sonris.com/
- 2) Click on **Data Access** in the left hand panel.
- 3) Under the section labeled

Conservation, click on Ground Water Information.

1.	USE OF WELL:							5.	LOCATION OF WELL (DD:MM:SS.SS):										
								Lati	ude:	۰	'	•	Long	itude:	o		1	"	
	Well Use:							Pari	sh:										
	Please specify other	er:							Dhy	ical Addr	occ.								
2.									Physical Address:										
۷.									Well is in a FEMA Flood Zone:			e:	Base Flood Elevation:					ft.	
	Well Owner Mailing Address:								Ground Elevation (GPS): ft. Map Included			ded:	l:						
	City:	State:		Zip Code:			Well is Near,			Approximately			miles	miles from					
	Well Owner Phone Number:																		
	Well Owner E-mail Address:																		
	Owner's Well Number or Name:																		
	Serial Number (Rig Supply Only):							6.	REMARKS:										
3.	WELL INFORMATION:																		
	Date Completed:		Depth of I	Hole:	ft. Depth of W	/ell:	ft.												
	Static Water Level	:	ft. below gro	ound surface	e Free-Flowi	ng Well													
	Date Measured: GWV Number (Vari				ance Request):														
	Name of the Person Who Drilled the Well:								FOR MONITOR/PIEZO/RECOVERY WELLS										
4.	CASING AND SCREEN INFORMATION:									ECTION	TOW	NSHIP	RAI	NGE	ELEV	VATION	1	QUAD	NO.
	Casing Type: Screen Type:																		
	in. from	ft. to	ft.	in. from	ft. to	ft.			NLY	PARISH	WEI	LL NO.	GE	OLOG	IC UNIT	D	ATE F	RECEIVE	D
	in. from	ft. to	ft.	in. from	ft. to	ft.			USE ONLY										
	Slot Size:		en Length:	ft.				REGISTERED BY: DATE REGISTERED:											
	Cemented From: ft. to ground su		-						OFFICE	REMARK	KS:								
	Cementing Method Used:								FOR										
	-																		

7. DRILLER'S LOG:

(Description and color of cuttings, such as shale, sand, etc. in feet below ground surface)

FROM	то	DESCRIPTION
	1	

^			ONLY:
×	F()K	HFAI	, () X A .

Average Depth: ft.

Number of Holes:

9. ABANDONMENT INFORMATION:

Does this well replace an existing well?

If **yes**, has owner been informed of state regulations requiring plugging of abandoned wells?

I certify that this work was done and completed in accordance with Regulations of the State of Louisiana for Water Wells, LAC56:I,

on: Date

by: Name of Water Well Contractor

License No. WWC -

I further acknowledge and agree that by typing my name or placing my mark in the signature space on this document it is my intention to electronically sign the document. Further, the electronic signature shall be considered as an original signature for all purposes and shall have the same force and effect as an original signature. Without limitation, "electronic signature" shall include faxed versions of an original signature or electronically scanned and transmitted versions (e.g., via pdf) of an original signature.

Authorized Signature:

Date: