



IOWA DEPARTMENT OF NATURAL RESOURCES
Abandoned Water Well
Plugging Record

1. Owner:

Name: CertainTeed Phone: 515-576-1133
Address: 2109 Quail Ave
City: Fort Dodge State: Iowa Zip: 50501
If this was a Public Water Supply Well, please provide:

PWSID Name: PWSID Number:

2. Location of Well (Cistern):

County: Describe well location on property:
GPS Well Location: Latitude: 42.491242 Longitude: -94.132226

3. Well Description:

Well depth: 30 ft
Depth to water: 22 ft
Casing depth: 30 ft Casing Material: Steel Plastic Concrete Clay Brick Stone
Casing diameter: 2 in.
Year or decade constructed: Type of Construction: Drilled Driven Bored Augured Dug
Is this a Monitoring Well? Yes No Well ID:
Check if Cistern Depth: Diameter:

I certify this well has been plugged as required by rule 567-39.8 of the Iowa Administrative Code (IAC). I agree to provide any additional information the county or department may need concerning this well.

Signature of Owner Date Plugged:

If plugged by certified well contractor, complete this box:
I have plugged this well as required by rule 567-39.8 of the Iowa Administrative Code (IAC).

Signature of Contractor: Cert No: 1986

OR, if plugged by well owner, complete this box:
The property owner has plugged this well following requirements in rule 567-39.8 of the Iowa Administrative Code (IAC) with the oversight and assistance of the designated county agent.

Signature of County Agent: Date Approved:

Eligible for Grants-to-Counties cost share: Yes No (Determined by County Agent)

Complete one form for each well plugged and submit within 30 days to the local county agent:

OR, only if no county agent is available, to:

Table with 2 columns: Webster County Health Department contact info and Iowa Department of Natural Resources contact info.



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PWSID Name: PWSID Number:

2. Location of Well (Cistern):

County: Describe well location on property:
GPS Well Location: Latitude: 42.488323 Longitude: -94.133996

3. Well Description:

Well depth: 42 ft
Depth to water: 25 ft
Casing depth: 42 ft Casing Material: Steel Plastic Concrete Clay Brick Stone
Casing diameter: 2 in.
Year or decade constructed: Type of Construction: Drilled Driven Bored Augured Dug
Is this a Monitoring Well? Yes No Well ID: 2
Check if Cistern Depth: ft. Diameter: ft.

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Signature of County Agent: Date Approved:

Eligible for Grants-to-Counties cost share: Yes No (Determined by County Agent)

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Table with 2 columns: Webster County Health Department contact info and Water Supply Section contact info.



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If this was a Public Water Supply Well, please provide:

PWSID Name: PWSID Number:

2. Location of Well (Cistern):

% of, % of, % of, Section, T, N, R, East, West
County: Describe well location on property:

GPS Well Location: Latitude: 42.488110 Longitude: -94.134232

3. Well Description:

Well depth: 19 ft
Depth to water: 16 ft
Casing depth: 19 ft Casing Material: Steel Plastic Concrete Clay Brick Stone
Casing diameter: 2 in.
Year or decade constructed: Type of Construction: Drilled Driven Bored Augured Dug
Is this a Monitoring Well? Yes No Well ID: 3
Check if Cistern Depth: ft. Diameter: ft.

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Signature of County Agent: Date Approved:

Eligible for Grants-to-Counties cost share: Yes No (Determined by County Agent)

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