HEADWATERS GROUNDWATER CONSERVATION DISTRICT (HGCD)

DRILLER'S CERTIFIED STATEMENT OF WELL COMPLETION

HGCD Well #: _____

Owner: _____

LICENSED DRILLER: _____

LICENSE No. & DESIGNATIONS: _____

- Was this well sealed or capped to meet TDLR requirements? ☐ Yes ☐ No
- Was a New Manufactured Screen installed per TDLR requirements? ☐ Yes ☐ No
- (If "No", a Manufactured Screen Waver Form MUST BE attached and submitted to TDLR.)

Depth of TDS reading: _____ TDS reading: _____

_____ _____

_____ _____

Well Depth: _____ **Ft. Aquifer:** Pick from List

Lat: _____ **Long:** _____

I hereby certify that this well was drilled by me (or under my supervision) and that this well was drilled and completed in accordance with District and State requirements and each and all of the statements herein are true.

_____ _____

Well Driller's Signature Date

Click here to email to HGCD