



Water Well Impact Assessment Checklist

Agricultural Operation Practices Act

CFO Name: _____ Land location: _____

Contact Person: _____ Permit #: _____

Inspector/Approval Officer: _____ Date: _____

This checklist is completed for multiple programs administered by the NRCB. Some information fields are used by one program but not another program. Therefore, the checklist does not have to have information entered in all fields in order to be completed for use in any one of the programs.

Well Information

Well ID #: _____

Presence of a Pit: <input type="checkbox"/> Pit Well <input type="checkbox"/> Pit Less		Year Well Drilled:
Depth of Bottom of Seal: <input type="checkbox"/> <10 m <input type="checkbox"/> 10-20 m <input type="checkbox"/> >20 m		
Screened Interval Depth:		
Seal Type: <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete/grout/puddled clay <input type="checkbox"/> Driven <input type="checkbox"/> Cuttings <input type="checkbox"/> None/Unknown		
Protection Around Well from Physical Damage(describe):		
Is the Ground Mounded Around the Well? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Casing Height: <input type="checkbox"/> >1' <input type="checkbox"/> <1'	Well Properly Capped: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Well Properly Cased: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Well Condition: <input type="checkbox"/> Good <input type="checkbox"/> Damaged		Used for Non-domestic: <input type="checkbox"/> Yes <input type="checkbox"/> No
Is the Well in Use: <input type="checkbox"/> Yes <input type="checkbox"/> No	Purpose of Well: <input type="checkbox"/> Livestock <input type="checkbox"/> Lawn/shelter belt <input type="checkbox"/> Other	
Total Depth of Well:	Location of Well (e.g. near hog barn):	
GPS Coordinates:		

Hydrogeological Information

Hydraulic Properties of Producing Zone:
Hydraulic Properties of Geologic Material Above the Producing Zone (ie. protective materials):

Sampling Information

Sample Collected From:	Type of Container Used:
Transportation Storage Method:	Sample Collected at Point Before any Treatment System: <input type="checkbox"/> Yes <input type="checkbox"/> No

Notes: _____

Facility Information

Facility #1:		
Type of Manure Storage: <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Catch Basin	Distance to Manure Storage:	
Evidence of Surface Contamination: <input type="checkbox"/> Yes <input type="checkbox"/> No	Age of Manure Storage:	
Type of Liner Under Manure Storage:	Depth of Manure Storage:	
Slope of Land From Manure Storage to Well:		
Land Surface cover from Facility to Well (greater than 50% of total pathway): <input type="checkbox"/> Vegetated <input type="checkbox"/> Bare <input type="checkbox"/> Paved		

Facility #2:		
Type of Manure Storage: <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Catch Basin	Distance to Manure Storage:	
Evidence of Surface Contamination: <input type="checkbox"/> Yes <input type="checkbox"/> No	Age of Manure Storage:	
Type of Liner Under Manure Storage:	Depth of Manure Storage:	
Slope of Land From Manure Storage to Well:		
Land Surface cover from Facility to Well (greater than 50% of total pathway): <input type="checkbox"/> Vegetated <input type="checkbox"/> Bare <input type="checkbox"/> Paved		

Facility #3:		
Type of Manure Storage: <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Catch Basin	Distance to Manure Storage:	
Evidence of Surface Contamination: <input type="checkbox"/> Yes <input type="checkbox"/> No	Age of Manure Storage:	
Type of Liner Under Manure Storage:	Depth of Manure Storage:	
Slope of Land From Manure Storage to Well:		
Land Surface cover from Facility to Well (greater than 50% of total pathway): <input type="checkbox"/> Vegetated <input type="checkbox"/> Bare <input type="checkbox"/> Paved		

Notes: _____
