



# WATER WELL SEALING FORM

DuPage County Health Department, Environmental Health Services  
111 N. County Farm Road, Wheaton, IL 60187

This form shall be submitted to this Department not more than 30 days after a well is sealed. Wells shall be sealed in accordance with sealing requirements in the DuPage County Private Water Supply Ordinance.

1. Ownership \_\_\_\_\_

Name Address City

2. Well location \_\_\_\_\_

Address City

Parcel # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_ Quarter of the \_\_\_\_\_ Quarter of the \_\_\_\_\_ Quarter of

Section \_\_\_\_\_ Township \_\_\_\_\_ N, Range \_\_\_\_\_ E of the 3<sup>rd</sup> principal meridian.

3. Year drilled \_\_\_\_\_ 4. Permit # (date if known) \_\_\_\_\_

(Leave blank if unknown)

(Leave blank if unknown)

5. Type of well: Drilled \_\_\_\_\_, Bored \_\_\_\_\_, Driven \_\_\_\_\_, Other \_\_\_\_\_

6. Total depth \_\_\_\_\_, diameter (inches) \_\_\_\_\_

7. Well clear of obstructions? Yes \_\_\_\_\_, No \_\_\_\_\_

If no, record depth and type of obstruction. \_\_\_\_\_

8. Details of well sealing:

Filled with \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_ ft.

Sealing material \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_ ft.

Filled with \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_ ft.

Sealing material \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_ ft.

Filled with \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_ ft.

Sealing material \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_ ft.

9. Casing record:

Upper 2 feet of casing removed? Yes \_\_\_\_\_, No \_\_\_\_\_. If no, record actual depth and reason for variation. \_\_\_\_\_

If well casing consists of brick, stone, or other porous material, was casing removed 10 feet below surface?

Yes \_\_\_\_\_, No \_\_\_\_\_.

10. Date well was sealed \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_.

Month Day Year

11. Licensed water well driller or other person approved by the Department performing well sealing:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Complete License Number

\_\_\_\_\_  
City State / Zip

\*Show well location on reverse side.

WELL LOCATION ON SITE

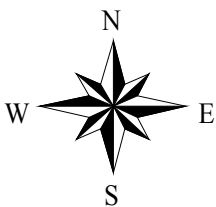
Show street name and distance of well from two adjacent lot lines. Please include buildings or other landmarks on site.

Original well construction:

Pitless adaptor \_\_\_\_\_, Buried seal \_\_\_\_\_, Pit \_\_\_\_\_, Other \_\_\_\_\_

Reason for sealing:

Demolition \_\_\_\_\_, Public water connection \_\_\_\_\_, Other \_\_\_\_\_



Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_