

District Health Department No. 4



ABANDONED WELL RESPONSE FORM

(Please fill out and return immediately in the enclosed envelope)

Name: _____ Phone: _____

Address: _____
Street City State Zip

Alpena County

100 Woods Circle
Suite 200
Alpena, MI 49707
(989) 356-4507
Fax (989) 356-3529

I plan to do the following with my well:

- HIRE A WELL DRILLING CONTRACTOR TO PLUG THE WELL.
- PLUG THE WELL MYSELF – I WILL NOTIFY YOUR DEPARTMENT BEFORE I PROCEED AND WILL SUBMIT AN ABANDONED WELL PLUGGING RECORD AFTER I COMPLETE THE WORK.

The well will be plugged by _____ (date).

Cheboygan County

Doris E. Reid Center
825 S. Huron St.
Suite 1
Cheboygan, MI 49721
(231) 627-8850
Fax (231) 627-9466

I have chosen not to abandon my well. I will meet the requirements of the Ground Water Quality Control Rules in the following manner:

- KEEP WELL ACTIVE

I affirm that the well is in operational condition at this time and that there are no plumbing connections (cross connections) between the piping serving the well and the piping system serving the structure now connected to the municipal water supply (if applicable).

- RETAIN IN A "TEMPORARY ABANDONED" STATUS

I intend to take the well out of service at this time, but wish to retain it for use in the future. I affirm that the well complies with current state well construction standards, is properly isolated from potential sources of contamination (e.g. sewage systems, sewer lines, underground tanks, etc.), is disconnected from all distribution piping and has the top of the casing securely capped with a threaded, welded or solvent welded, watertight cap to prevent entrance of surface water or foreign materials into the well.

I understand that by not plugging the well, I am assuming responsibility for proper maintenance of the well to prevent ground water contamination and prevent it from becoming a physical safety hazard. If I sell my property, it is my obligation to disclose the presence of the well pursuant to the Seller Disclosure Act, PA 92 of 1993.

Signature: _____ Date: _____

Montmorency County

P.O Box 183
12519 State Street
Atlanta, MI 49709
(989) 785-4428
Fax (989)785-2217

Presque Isle County

106 E. Huron St.,
Suite A
Rogers City, MI 49779
(989) 734-4723
Fax (989) 734-3866

www.dhd4.org