



Department of Natural Resources
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Division of Environmental Health, Drinking Water Program
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State
Of
Alaska



Well Record of Decommissioning (version 2021)

This form is intended to convey information regarding the decommissioning of a water well as required by both DEC and DNR. Add additional datasheets (e.g., site schematic and photos) as necessary.

Well Decommissioner or Contractor		Well and Owner Details *	
Name: <u>K. ADAMS/N. Basch</u>	Owner's name and address: <u>Fort Greely</u>		
Company: <u>CES-Rescon</u>	Well location - Street & number: <u>Robin Road</u>		
Address: <u>8361 Petersburg St.</u>	Well location - Subdivision, Lot & Block:		
(continued):	Meridian: <u>F</u> Township: <u>91N</u> Range: <u>010E</u> Section: <u>11</u> Quarters:		
Phone: <u>907 744 4695</u>	GPS to 5 places: Latitude: <u>63.967</u> Longitude: <u>-145.728</u> Datum:		
Email: <u>kadamscresconalaska.com</u>	Well Name or AK WELTS Number: <u>MW28</u>		

Please check all boxes that apply and provide all requested information. Do not check boxes that do not apply.

Details of Former Well		Former Well Description (Not required if original well log attached)			
Public water system? (See note **) Yes: ☒ No: ☐	Original Driller's Name: <u>HA Discovery Drilling</u>	Well depth (ft bls): <u>250</u>	Date of completion: <u>9, 2, 2011</u>		
If so, PWSID number:	Well Type	Drilled ☒ Yes: ☐ No: ☐	Finish	Cased ☒ Yes: ☐ No: ☐	SWL (ft bls): <u>NA</u>
Single Family Domestic Yes: ☒ No: ☐	Driven Yes: ☐ No: ☐	Capped ☒ Yes: ☐ No: ☐	Screened ☒ Yes: ☐ No: ☐	Bedrock (ft bls): <u>NA</u>	Flowing artesian Yes: ☒ No: ☐
Commercial/ Fishery Yes: ☒ No: ☐	Jettied Yes: ☐ No: ☐	Perforated Yes: ☒ No: ☐	Well liner present Yes: ☒ No: ☐	Casing type: <u>PVC</u>	Flood prone site Yes: ☒ No: ☐
Irrigation/Agricultural Yes: ☒ No: ☐	Dug Yes: ☐ No: ☐			Diameter (inches): <u>2"</u>	Well condition <u>Good</u> Poor: ☒ No: ☐
Heating / Cooling Yes: ☒ No: ☐	Unknown Yes: ☐ No: ☐			Stickup (ft): <u>2'</u>	Grouted Yes: ☒ No: ☐
					Well house Yes: ☒ No: ☐

** Public Water System decommissioning may require additional documentation, please contact DEC in this regard.

Decommissioning notes:		Reason for well decommissioning:		Decommissioning process	
Include notes regarding any deviations from state approved methods of decommissioning as described in 18 AAC 80.015e. http://dec.alaska.gov/eh/dw/regulations/		<u>LUC Management</u>		Well disinfected prior to decommissioning Yes: ☒ No: ☐	
AWWA A100 Method Yes: ☐ No: ☐		Excavation and Fill Details		Plumbing removed from casing Yes: ☒ No: ☐	
Alaska BMPs Method ☒ Yes: ☐ No: ☐		Placement method <u>NA</u>		Liner (if any) removed Yes: ☒ No: ☐	
Other Method (describe below) Yes: ☐ No: ☐		Excavation Depth (ft) <u>NA</u>		Electric wiring removed from site Yes: ☒ No: ☐	
		Type of fill used <u>NA</u>		Attached an original well log Yes: ☒ No: ☐	
		Volume of fill (cu ft)		Well log listed at DNR Yes: ☒ No: ☐	
		# Bags of bentonite in casing <u>2</u>		Local authorities notified Yes: ☒ No: ☐	
				DEC notified of decommissioning Yes: ☒ No: ☐	
				DNR notified of decommissioning Yes: ☒ No: ☐	

*** Signatures required	
Owner***: <u>Justin Hoge</u>	Decommissioner / Contractor***: <u>Thyphail</u>
Date: <u>OCT 1, 23, 2023</u>	Date: <u>9, 21, 2023</u>

1) Submit this form to DNR and DEC (see contact info at top of form) within 45 days of decommissioning, as per 11 AAC 93.140 and 18 AAC 80.015.

2) Attach an original water well log. If not available, a blank water well log form is available at <http://dnr.alaska.gov/mhw/forms/waterother> if well details are known.

3) Attach maintenance or water usage records and provide an adequate locational description, including maps or sketches. Use additional pages as needed.

4) This form is under development and is subject to change. Please submit suggestions for changes or improvements to the addresses listed above.

Please attach schematics and photos to further document the information provided on this form. This is particularly important for public water system wells and also any other wells that might impact the public water system.

PROJECT NUMBER

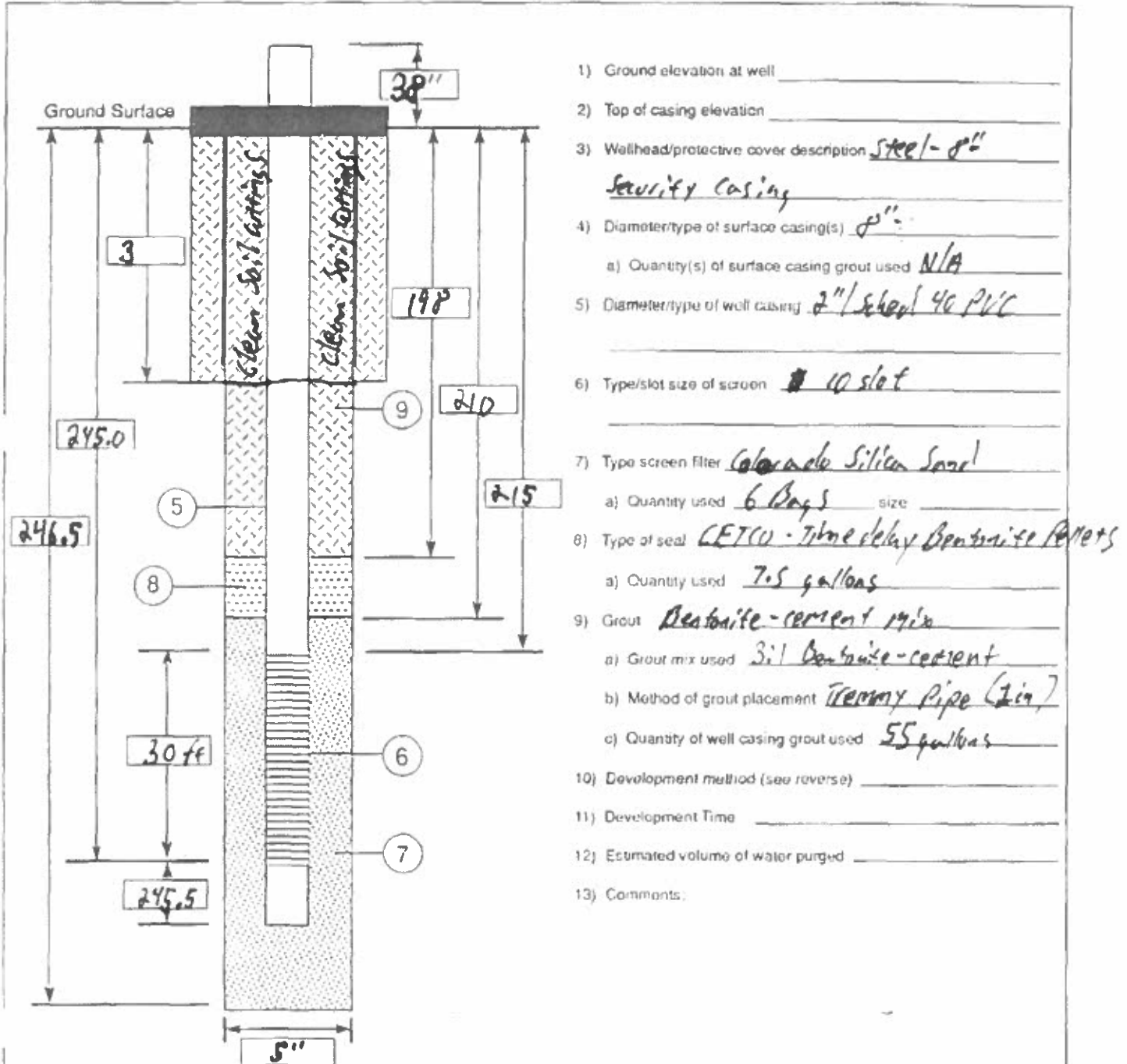
WELL NUMBER

MH-28

MONITORING WELL CONSTRUCTION DETAILS

PROJECT STF Remediation

LOCATION _____

DRILLING CONTRACTOR Discovery Drilling-Mainey & SonsDRILLING METHOD AND EQUIPMENT Air Rotary - 340lb Hammer - 2ft Split SpoonSTART 8-30-11FINISH 9-2-11LOGGER Wendy BowdoinWATER LEVEL AND DATE 221.5

Note: All measurements are from ground surface.