

**GROUND WATER PROTECTION REGULATION – SCHEDULE 2**  
**REPORTING REQUIREMENTS FOR WELL IDENTIFICATION FOR A WELL THAT IS FOR THE**  
**PURPOSE OF SUPPLYING A WATER SUPPLY SYSTEM**

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**1. Well Identification Plate Information**

Date:..... Well Identification Plate Number: .....

Name of person who attached Plate: .....

Description of where Plate is attached (*usually to well casing or well cap*).....

.....

**2. Water Well Information**

If well construction report (drill log) is attached to this form, please check [ ]

Name for the Water Supply System Well (*e.g., "Carp Lake Provincial Park Hand Pump #2"*)

.....

Well location description or street address:.....

.....

**LAT**itude:      .      ° N

**LONG**itude:       .      ° W

*You may enter well coordinates below using UTM zone and UTM m East, UTM m North, but Northern Health prefers Latitude and Longitude in decimal degrees, with 5 decimal places.*

Source of Lat/Long or UTM co-ordinates (*check one*):

GPS [ ]    1:20,000 map [ ]    1:50,000 map [ ]    Google Earth    Other [ ] (*pecify below*)

.....

Legal Description of Property containing Well ( <i>enter all available information</i> )		
Land District: .....	Township:.....	Block: .....
District Lot: .....	Section: .....	Plan: .....
Lot: .....	Range: .....	PID: .....

**3. Water Supply System Information**

Water Supply System Name: .....

Owner Name: .....

Mailing Address: .....

City or Town: .....    Postal Code: .....

Phone Number: (..... ) .....    E-Mail: .....

Well Depth: ..... check one [ ] feet or [ ] metres below ground surface

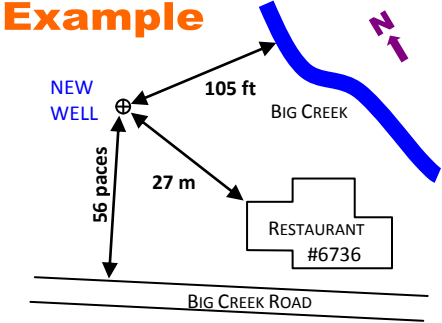
Water Level in Well: ..... check one [ ] feet or [ ] metres below ground surface

Well Casing Diameter:..... check one [ ] inches or [ ] mm

Well Casing Stick-up Height: ..... check one [ ] inches or [ ] mm

### Well Location Sketch

**Example**



Please use the box on the right to sketch the well location and proximity to roads, buildings, waterways, etc. Distances may be measured in feet or metres or paced off. You may show the well location on a separate page, if you prefer (e.g. add to lot plan).

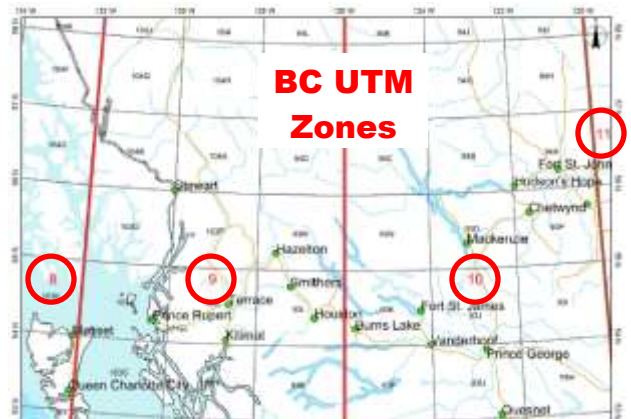
### SCHEDULE 2 NOTES:

#### Well Location:

Provide as much information as possible. (Not all fields will be applicable in any one location, depending on the organization of the land registry data in the area.)

#### Geographic Coordinates:

Ensure the map datum on your GPS unit is set to "WGS84". Latitude and Longitude must be expressed as decimal degrees (54.91253 °) to 5 or 6 decimal places. If using UTM Coordinates, please include the UTM Zone (Zone 9 west of Houston, Zone 10 east of Burns Lake.)



#### Supporting Documentation:

Please include copies of any of the following documents, if available:

- well construction reports / drill logs
- pumping test reports
- documents that include information about the well, local geology, well location, etc.
- **please provide any other information you may know or have heard about your water supply well.**

Please send completed forms to:

<b>Mail:</b> Deputy Comptroller Ministry of Environment PO Box 9341 Stn Prov Gov Victoria BC V8W 9M1	<b>Fax:</b> Groundwater Data Technician (Victoria) 250 356-7197	<b>E-Mail:</b> <a href="mailto:groundwater@gov.bc.ca">groundwater@gov.bc.ca</a> - please include "Schedule 2" and the Well Identification Number in <b>Subject</b> of the e-mail.
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