



EPA Region 8 Drinking Water Unit Unknown Integrity of Well Checklist

Fill out one checklist for each well.

Submit labeled photos of each well component not inspected in the Sanitary Survey.

Completely evaluate each uninspected well component with this form.

PWS Name:	PWS ID:
PWS Facility Name of Well:	PWS Facility Well ID:
Proposed Inspection Date:	Actual Inspection Date:
Name of Person Filling Out Form:	Title of Person Filling Out Form:
I certify that this information is complete and accurate:	Date:

Well Status				
Significant Deficiency		Required Correction	Proposed Completion Date	Actual Completion Date
☐ Yes ☐ No	Is this well considered active?	If you answer yes, skip this section.		
☐ Yes ☐ No	If considered inactive, has its disconnection from the system been documented?	If you answer no, provide photographs of transmission line physical disconnection from the well & well valving removal.		
☐ Yes ☐ No	Has the well been properly plugged & abandoned per applicable regulations?	If you answer yes, provide documentation of the abandonment & method to EPA Region 8.		

Well Location				
Significant Deficiency		Required Correction	Proposed Completion Date	Actual Completion Date
☐ Yes ☐ No	Is well in a pit or vault?	If you answer no, it is not required. Skip the next question.		
☐ Yes ☐ No	If well is in a pit or vault, is there drainage or a permanent or portable sump pump?	If you answer no, how will you address this deficiency?		
☐ Yes ☐ No	Does surface water drain away from the well (including wells in pits or vaults)?	If you answer no, how will you address this deficiency?		
☐ Yes ☐ No	Any pollution sources near the well (e.g., chemical or cleaning supply storage, agricultural or industrial activity, rodents or droppings)?	If you answer yes, how will you address this deficiency?		
☐ Yes ☐ No	Is the well in the FEMA insurance 100-year flood plain or other known flood area?	If you answer no, skip next question.		
☐ Yes ☐ No	Is the well casing top at least 3 feet above the highest known flood elevation?	If you answer no, how will you address this deficiency?		

Well Protection & Sampling

Significant Deficiency		Required Correction	Proposed Completion Date	Actual Completion Date
☐ Yes ☐ No	Is the well protected from vehicle damage? Provide photo documentation.	If you answered no, install protection: 4 steel bollards, large boulders, concrete jersey barriers, or a chain link fence enclosing the well.		
☐ Yes ☐ No	Is there a source water sample tap for GWR compliance?	If you answered no, install a smooth-nosed tap prior to treatment and/or storage.		
☐ Yes ☐ No	If there is a GWR sample tap, is it prior to any treatment or storage?	If you answered no, relocate a smooth-nosed tap prior to treatment and/or storage.		

Well Construction

Significant Deficiency		Required Correction	Proposed Completion Date	Actual Completion Date
☐ Yes ☐ No	Is casing height sufficient? Measure well casing height. Provide photo documentation & record height here:	If not $\geq 12''$ above a concrete floor (indoor well) or $\geq 18''$ above natural ground level (outdoor well), or if in a flood plain, raise it as appropriate.		
☐ Yes ☐ No	Does well have a proper sanitary seal? If you answer yes, photograph the well top & side if the seal is visible. If not, remove the cap or a cap plug and photograph the seal. If you answer no, install a properly fitted neoprene gasket. Do not use caulking or sealant. Document with photographs. <i>NOTE: Some well caps have a gasket sealing the cap top to the bottom and an O-ring sealing the cap bottom to the well casing. The gasket should form a tight seal and not be degraded. The O-ring should also be checked for degradation. If necessary, remove the cap to show a competent seal.</i>			
☐ Yes ☐ No	Is the electrical wiring fully encased in conduit and sealed at the electrical box and well cap? If you answer no, how will you correct this deficiency?			
☐ Yes ☐ No	Does the well cap move and/or does the well cap have any missing bolts? The well cap should be firmly installed, all bolt holes should have properly fitting bolts, and the cap shouldn't move with a light push. If you answer no, how will you correct this deficiency?			

Well Vent						
Significant Deficiency		Required Correction	Proposed Completion Date	Actual Completion Date		
☐ Yes ☐ No	Does the well have a vent?	If you answer no, it is not required. Skip this section.				
☐ Yes ☐ No	Does it terminate in a downward position?	If you answer no, reconfigure vent & provide photographs.				
☐ Yes ☐ No	Is it covered with #24-mesh corrosion-resistant screening?	If you answer no, install #24-mesh corrosion-resistant screen & provide photographs.				

Other Openings in Well				
Significant Deficiency		Required Correction	Proposed Completion Date	Actual Completion Date
☐ Yes ☐ No	Any open pipes or tubing near the wellhead?	If you answer no, skip the next 2 questions. If yes, describe its/their purpose:		
☐ Yes ☐ No ☐ Unknown	Does it/do they penetrate the well casing?	If you answer no, skip the next question.		
☐ Yes ☐ No	If there is casing penetration or it is uncertain, is/are opening(s) downturned & screened with #24-mesh corrosion-resistant screen or properly capped?	If you answer no, install #24-mesh corrosion-resistant screen or a properly sealing cap & provide photographs.		
☐ Yes ☐ No	Any other types of holes or openings in the wellhead?	If you answer yes, how will you address this deficiency?		

Well Air Release/Vacuum Release Valves				
Significant Deficiency		Required Correction	Proposed Completion Date	Actual Completion Date
☐ Yes ☐ No	Does the well have an air relief or vacuum relief valve?	If you answer no, it is not required. Skip this section		
☐ Yes ☐ No	Does it terminate in a downward position?	If you answer no, reconfigure & provide photographs.		
☐ Yes ☐ No	Is it at least 8" above the floor?	If you answer no, reconfigure & provide photographs.		
☐ Yes ☐ No	Is it covered with #24-mesh corrosion-resistant screening?	If you answer no, install #24-mesh corrosion-resistant screen & provide photographs.		