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Approval List _	

STATE OF UTAH

Department of Natural Resources Division of Water Rights



APPLICATION FOR WATER WELL DRILLERS LICENSE For the Year_____



Do not fill out this form until you have read and understand the most recent version of the "State of Utah Administrative Rules for Well Drillers" and other reference materials found in the Well Drillers Licensing Packet. Make checks payable to Utah Division of Water Rights. Send application to: Utah Division of Water Rights, PO Box 146300, SLC UT 84114-6300

Application, with an initial statutory \$350 filing fee for consideration of the issuance of a Utah Water Well Drillers License, is hereby filed with the Office of the State Engineer to engage in the practice of drilling, constructing, repairing, cleaning, deepening, and abandoning wells for the purpose of utilizing or monitoring underground water in accordance with Utah Code § 73-3-25 Annotated 1953, as amended.

Name	me			Company	Company Name:						
Mailing Address:						City/Stat ZIP Code					
Business Pho						Residence					
Business Pho	one:					Residenc	e Pno	one:			
Cell Phone:				FAX Nur	FAX Number:						
Date of Birth: E-Mail Address											
Utah Well D	rillin	g Op	erator Registration	Num	ber (i	f applicable)					
Applicant reque	ests l	icens	sure to construct v	wells	usin	g the following dr	illin	g rig(s) or method(s) (Check all	l that	apply):
Air Rotary			[]	M	lud Ro	otary []			Cable Tool	[]
Flooded Reverse			[]	D	ual W	all Reverse []			Auger/Boring]]
Jetting/Driving	tting/Driving [] Percussion Hammer			Sonic [[]			
Other:				— Hammer		1 []			Direct Push]]
Applicant propo	oses	to co	onstruct the follow	ving	well 1	types as a licensed	l Uta	ıh We	ell Driller (Check all that a	apply)):
Domestic/Stock]]	Monitor]]	Cathodic Protection []			Clean/Renovate/Deepen]]
Municipal	[]	Public Supply	[]	Irrigation	[]	Piezometer	[]
Test Well]]	Sump	[]	Industrial	[]	Tunnel/Horizontal Well]]
Injection]]	Heat Pump	[]	Dewatering	[]	Abandonment]]
Other:											

A 1'	N. T			
Applicant	Name:			

RECORD OF DRILLING EXPERIENCE

Describe your drilling experience in the table below. Use the back of this page if additional room is necessary to describe experience.

Method ¹	Rig Make/Model	Number of Wells Drilled	Total Hours as Apprentice (Helper)	Total Hours as Operator	Hours as Foreman or Licensee	Total Years/Months Experience
lling Methods include: Air	Rotary, Mud Rotary, C	Cable Tool, Reverse Re	otary, Auger, Becker Hamr	ner, Dual Wall Re	verse, Rotasonic, or o	other (specify).
erence and/or traini	ing certification	s, if available.	(Use back of page i	f needed)		
scribe any well dril			course work you h	ave complet	ed (documenta	ition of course
).	Hours Completed	Credits Rece	eived	Date
hool/Class Attended ferences: List the nated to well drilling	d ame and addres g and construction	s of three (3) peon. By signing	ersons who can atte	st to your un e applicant g	derstanding an	d experience Engineer*s Office
ferences: List the nated to well drilling rmission to contact	d ame and addres g and construction	s of three (3) peon. By signing ences.	ersons who can atter this application, the	st to your un e applicant g	derstanding anives the State F	d experience Engineer*s Office
ferences: List the nated to well drilling rmission to contact	d name and addres g and construction the listed refere	s of three (3) peon. By signing ences.	ersons who can attenthis application, the	st to your un e applicant g	derstanding anives the State F	d experience Engineer*s Office
ferences: List the nated to well drilling rmission to contact	d name and addres g and construction the listed refere	s of three (3) peon. By signing ences.	ersons who can attenthis application, the	st to your un e applicant g (Uta (Sta	derstanding anives the State F	d experience Engineer*s Office se No., if applicable) (Zip Code)
ferences: List the nated to well drilling rmission to contact (Name) (Street Addre	d name and addres g and construction the listed refere	s of three (3) peon. By signing ences.	ersons who can attenthis application, the (Phone No.)	st to your un e applicant g (Uta (Sta	derstanding anives the State E h Well Driller Licens ate)	d experience Engineer*s Office se No., if applicable) (Zip Code)
(Street Addre	d name and addres g and construction the listed reference ess and/or PO B	s of three (3) peon. By signing ences.	(Phone No.) (Phone No.)	(Uta (Sta (Sta	derstanding anives the State E h Well Driller Licens ate)	d experience Engineer*s Office se No., if applicable) (Zip Code) se No., if applicable) (Zip Code)

Applicant Name	Well Driller Application Page 3 of 3
List the type, make, and model of drilling rig(s) that you inter-	nd to use as a licensed driller in the State of Utah.
Do you have well abandonment equipment available to prope	
zone upwards) grout sealing materials (cement and/or benton	nite)? Yes or No
AFFIDA	AVIT
STATE OF	
The undersigned, being first duly sworn deposes and states the Water Well Drillers License Application as outlined above is he/she is familiar with the State of Utah Administrative Rule R655-4) and will follow the well drilling administrative requipromulgated.	s true and correct. The undersigned further states that s for Water Well Drillers (Utah Admin. Code
Applicant Signature	Date
Subscribed and sworn before me thisday of	, 20
Notary Public	Seal (Commission Expires)