



STATE OF MISSOURI  
MISSOURI DEPARTMENT OF NATURAL RESOURCES  
GEOLOGICAL SURVEY PROGRAM  
WELLHEAD PROTECTION SECTION

## PUBLIC WATER SUPPLY NOTIFICATION

OFFICE USE ONLY - REFERENCE NUMBER

Submit this form to Wellhead Section within 60 days of client connection to public system.

PUBLIC WATER SUPPLY NOTIFICATION TO DNR – for households previously served by a well

### WELL OWNER INFORMATION

OWNER NAME		TELEPHONE NUMBER (OPTIONAL)	
		( )	
OWNER ADDRESS	CITY	STATE	ZIP CODE
ADDRESS OF WELL (IF DIFFERENT THAN ABOVE)		COUNTY	

### PUBLIC WATER SUPPLY INFORMATION

CONTACT PERSON		TELEPHONE NUMBER	
		( )	
PWSS NAME		PWSS ID NUMBER	
		MO	
PWSS ADDRESS	CITY	STATE	ZIP CODE

### LANDOWNER PRIVATE WELL LOCATION INFORMATION – to be submitted by water district (fill in one type of location identification)

LEGAL LOCATION			
__ 1/4	__ 1/4	__ 1/4	Sec. __ Township __ North Range __ <input type="checkbox"/> East <input type="checkbox"/> West
PRIVATE WELL GPS LOCATION			
__ ° __ ' ____ " West Longitude		__ ° __ ' ____ " North Latitude	

### 911 ADDRESS OF WELL LOCATION

911 ADDRESS OF WELL LOCATION SAME AS ABOVE

STREET NUMBER & NAME	CITY	STATE	ZIP CODE
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### INFORMATION SUPPLIED BY WELL OWNER

This part of the form to be completed by well owner before connection to public water.

I hereby certify that:

- Existing wells will remain in use and will be properly plugged when no longer in use or becomes in a state of disrepair (including inoperable pump or pump removal).
- All known abandoned wells on property have been plugged.
- Any abandoned wells will be plugged within 90 days. The well owner must notify the division 10 days prior to plugging well so that a representative may make required inspection.

WELL OWNERS SIGNATURE

DATE

MO 780-1427 (10-04)

REMIT TO: WELLHEAD PROTECTION SECTION, PO BOX 250, ROLLA, MO 65402 573/ 368-2165.