



Pump Test Submittal Form
 for New Dwellings and Buildings Open to the Public
Minor Pump Test – 4 hours with static water level

Property Site:

Owner: _____

Site Address or Nearby Roads: _____

Twp ____ Range ____ Section ____ Tax Lot ____

Number of wells on the property: _____

For details on how to conduct the pump test, **see the handout titled “Water Supply Requirements for Building Permits ~ New Dwellings and Places Open to the Public”** (revision date 12/08) or later.

Site of Well (if different):

Owner: _____

Site Address or Nearby Roads: _____

Twp ____ Range ____ Section ____ Tax Lot ____

Number of wells on the property: _____

	Pump Test Well	Monitoring Well #1	Monitoring Well #2
		Required for all wells on this property	
Well ID (L-number) <i>if none exists, assign a reference number for this test.*</i>			
Depth of well		<i>if known</i>	<i>if known</i>
Pump depth		<i>if known</i>	<i>if known</i>
Depth at which water was first detected during drilling		<i>if known</i>	<i>if known</i>
Static water level (prior to pumping)			

- 1. For each well (pumped or monitored), complete a data sheet.** Use the attached data sheet. Attach additional sheets as necessary.
- 2. Attach a scaled map** showing all well locations, well ID numbers or reference numbers (matching the number(s) used above).
- 3. The subject well’s rate of sustained yield** determined by this professional: _____ gpm
- 4. Describe how you determined this sustained yield. ****

 Signature of the Oregon-licensed well driller, pump installer, geologist, engineering geologist, or engineer who performed the test

 License type and number

 Exp. date

Company Name: _____

Company Phone Number: _____

* The well must be registered with Oregon Water Resources. Go to www.wrd.state.or.us or call 503-986-0850.
 **Attach additional sheets as needed. The professional should attach other data he/she thinks are appropriate.

