**WATER SUPPLY INVENTORY LIST** (WSI-034D) - Item #5.4

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| APPLICANT |  | | Application/Permit No. | |  |
| **Inventoried by** | |  | **Date Inventoried** |  | |

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| **INSTRUCTIONS**:   1. Fill in all required information. 2. Make copies of this form as needed. 3. Use the back of this page or additional sheets as needed. | | |
| **Map Number** | **User’s Name** | **Address** |
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| WATER SUPPLY INVENTORY LIST | | | | | | | | | | | |
| Applicant |  | | | | Application/Permit No. | | | |  | | |
|  | **Map No.** |  |  |  | |  |  |  | |  |  |
| **Type of**  **Supplies** | Well |  |  |  | |  |  |  | |  |  |
| Spring |  |  |  | |  |  |  | |  |  |
| Cistern |  |  |  | |  |  |  | |  |  |
| Municipal |  |  |  | |  |  |  | |  |  |
| Pond |  |  |  | |  |  |  | |  |  |
| Other (specify type) |  |  |  | |  |  |  | |  |  |
| **Water Use** | Domestic |  |  |  | |  |  |  | |  |  |
| Agriculture |  |  |  | |  |  |  | |  |  |
| Industrial |  |  |  | |  |  |  | |  |  |
| Other (specify) |  |  |  | |  |  |  | |  |  |
| **Well Data**  \*measured from top of well  \*\* If yes, please provide  log & name of Drilling Co. | Well Total Depth (ft.) |  |  |  | |  |  |  | |  |  |
| Cased Depth (ft.)\* |  |  |  | |  |  |  | |  |  |
| Well Diameter (in.) |  |  |  | |  |  |  | |  |  |
| Well Elev. (Top) MSL |  |  |  | |  |  |  | |  |  |
| Year Drilled |  |  |  | |  |  |  | |  |  |
| Static Water level (ft.)\* |  |  |  | |  |  |  | |  |  |
| Well Yield (CFS or GPM) |  |  |  | |  |  |  | |  |  |
| Well Screen (Yes or No) |  |  |  | |  |  |  | |  |  |
| Slotted Casing  (Yes or No) |  |  |  | |  |  |  | |  |  |
| Driller’s Log Available?\*\* |  |  |  | |  |  |  | |  |  |
| **Spring Data** | Spring Elev. (ft. ) MSL |  |  |  | |  |  |  | |  |  |
| Spring Source (Aquifer) |  |  |  | |  |  |  | |  |  |
| Spring Flow Rate (CFS or GPM) |  |  |  | |  |  |  | |  |  |
| Spring Protected  (Yes or No) |  |  |  | |  |  |  | |  |  |
| Type of Protection |  |  |  | |  |  |  | |  |  |
| **Water Treatment** | Water Treatment (Yes or No) |  |  |  | |  |  |  | |  |  |
| Type of Treatment |  |  |  | |  |  |  | |  |  |

**NOTE: Attach sheets for water quality information, pond data, and comments concerning the referenced supplies.**

Also indicate whether the water user denied the Applicant/Permittee access to the supply (for the pre-mining survey).