



# Kalamazoo Conservation District Well Screening 2020 – Well Water Screening Week

## 2020 MICHIGAN DRINKING WATER WELL SCREENING SAMPLE INFORMATION SHEET

**Please complete this form and turn it in with your well water sample.  
Complete one form for each sample submitted.  
Please write clearly!**

**Sample Code Number  
(Please Leave Blank)**

Name \_\_\_\_\_

**Sampling Address** (where sample was taken)

**Mailing Address for Results** (if different)

Street \_\_\_\_\_

Street \_\_\_\_\_

City/State/Zip \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_

Phone \_\_\_\_\_

County \_\_\_\_\_

County \_\_\_\_\_

Date Sampled: \_\_\_\_\_

Sampling Point: *It is very important to identify the sample clearly with a name (cottage well, mom's well, etc.)* \_\_\_\_\_

Well depth, feet (estimate if unknown) \_\_\_\_\_ Age of well, years: (estimate if unknown) \_\_\_\_\_

Well diameter (circle the correct figure, estimate if not known): 2" 4" 5" 6" Other \_\_\_\_\_

Do any pregnant women or infants under 6 months old regularly live in this home? Y N

if **No**, skip this line. If **Yes**, do they drink the water supplied by this well? Y N

Please indicate the distance in feet from the well to:

Nearest farmed field (not pasture) \_\_\_\_\_

Nearest pasture with grazing livestock \_\_\_\_\_

Nearest septic system drain field \_\_\_\_\_

Nearest animal yard/feedlot (cattle, horses, chickens, pigs, etc.) \_\_\_\_\_

Nearest pesticide or fertilizer storage or mixing area \_\_\_\_\_

Nearest inland lake or pond \_\_\_\_\_

Please put a check by the best description of your general soil texture:

\_\_\_\_ Very coarse/sand      \_\_\_\_ Sandy loam      \_\_\_\_ Silt loam      \_\_\_\_ Loamy or sandy clay

\_\_\_\_ Heavy clay      \_\_\_\_ Organic/muck      Other \_\_\_\_\_

Please circle or describe the main land uses within half a mile of your well (row crop, pasture, orchard, forest, rural residential, suburban, commercial, industrial, etc.) \_\_\_\_\_

\_\_\_\_\_