



**Well Questionnaire**  
**Village of Corrales Public Meeting – September 27, 2007**

*Please provide any available information about your domestic water supply well.*

<b>Name:</b>	<b>Date:</b>
<b>Street Address:</b>	<b>Daytime Phone Number:</b>

WELL INFORMATION		
Date of Installation:	NM State Engineer Well Number:	
Is the well log available? (if yes, please attach a copy) <input type="checkbox"/> Yes <input type="checkbox"/> No		
Total depth of well:	Depth of screened interval:	Depth to water at time well was drilled:
Capacity (gal. / min.):		Current depth to water if known:
Any problems with drawdown, drying up, low productivity, other? (explain)		

WELL USE				
Total number of people in household using water from the well:				
Inside Use? (drinking/washing) <input type="checkbox"/> Yes <input type="checkbox"/> No	Outside Use? (landscape) <input type="checkbox"/> Yes <input type="checkbox"/> No	Irrigation? <input type="checkbox"/> Yes <input type="checkbox"/> No	Livestock Watering? <input type="checkbox"/> Yes <input type="checkbox"/> No	Business? <input type="checkbox"/> Yes <input type="checkbox"/> No Type:

WATER QUALITY ISSUES				
<input type="checkbox"/> Odor	<input type="checkbox"/> Taste	<input type="checkbox"/> Staining	<input type="checkbox"/> Color	<input type="checkbox"/> Water Quality Analysis (please attach copies)

ON-SITE WASTEWATER DISPOSAL			
Size of lot (acres):	Septic Tank/Drainfield? <input type="checkbox"/> Yes <input type="checkbox"/> No		Tank Size:
Advanced treatment system installed? <input type="checkbox"/> Yes <input type="checkbox"/> No	How often is septic tank pumped?	Nearest distance from well to any part of the leachfield:	Is space available (10' x 10') for on-site treatment? <input type="checkbox"/> Yes <input type="checkbox"/> No
Any problems with system? (History of failed leachfield?) (explain)			

*Please bring this information with you to the October 25, 2007, public meeting. If unable to attend, you may give the information to the Village Clerk.*