



TOWN OF DUXBURY

BOARD OF HEALTH
TOWN OFFICES
878 TREMONT STREET
DUXBURY, MASSACHUSETTS 02332-4499

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DECOMMISSIONING REPORT FOR PRIVATE WELLS

Requirements of 2.10 of the Duxbury Board of Health Regulations for Private Wells.

Owner to file a copy of Decommissioning Report at Plymouth County Registry of Deeds or Land Court as part of chain-of-title. Book and page of registry filing or Land Court reference should be noted on copy filed with the Board of Health.

Name of property owner: _____
Address: _____
Address where well is located: _____
Assessor's Parcel Number: _____
Name of Registered Well Driller: _____
Address: _____
Reason for abandonment: _____

Location of well, test hole or boring on plot plan with reference to at least two permanent structures (or coordinates determined by a registered land surveyor or engineer).

Information about well, test hole or boring:

Depth _____ Diameter _____ Type of Casing _____
Calculations made to determine volume: _____
Static Water Level Before Plugging: _____
Types of Plugging Material Used (include mix specifications) _____
Quantity of each type of plugging material used _____

Describe plugging procedure used, including:

- Removal of pump or other obstructions _____
- Removal of screen _____
- Perforation or removal of casing _____
- Method(s) used to place plugging material(s) _____

Attach a copy of the original Well Driller's Report (if available).

Filed by: _____
Date filed: _____

Registry filing or Land Court reference: