

Bernalillo County  
Natural Resource Services  
111 Union Square SE, Suite 100  
Albuquerque, NM 87102  
Phone (505) 314-0375  
Fax (505) 462-9833



# Monitoring Well Permit Application

**Office use only**  
Permit No. NRWM \_\_\_\_\_  
Fee \$0.00  
Application Complete:  Yes  No  
Reviewed by \_\_\_\_\_  
Date \_\_\_\_\_

**Applicant Information**

Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Email \_\_\_\_\_ Fax Number \_\_\_\_\_

**Well Location Information**  Site plan drawn to scale included

Site Address \_\_\_\_\_  
Legal Description \_\_\_\_\_  
UPC \_\_\_\_\_ Pin# \_\_\_\_\_  
Zone Atlas Page \_\_\_\_\_  Zone atlas page attached

**Installation Information**

Proposed Use:  Water Quality  Water Level  Both  
Has the well been constructed?  Yes  No  
Number of monitoring wells \_\_\_\_\_  
Completion Depth(s) \_\_\_\_\_ Casing Type(s) \_\_\_\_\_  
Casing Diameter(s) \_\_\_\_\_  
Expected Contaminants \_\_\_\_\_

**Required Attachments**

- A site plan drawn to a scale of 1 inch equals 20 feet showing at the minimum:
  - The proposed location of the well on the lot
  - Other identifiable features on the lot
- A copy of the Zone Atlas page with the property identified

The foregoing information and the attached documentation are true and correct to the best of my knowledge. I understand the issuing of this permit does not relieve me from the responsibility of complying with all regulations. Obtaining the permit does not relieve me from the responsibility of obtaining any permits required by State, County, or City regulations or ordinances or other requirements of State and Federal law.

Printed Name \_\_\_\_\_ Date \_\_\_\_\_  
Signature \_\_\_\_\_