

# APPLICATION

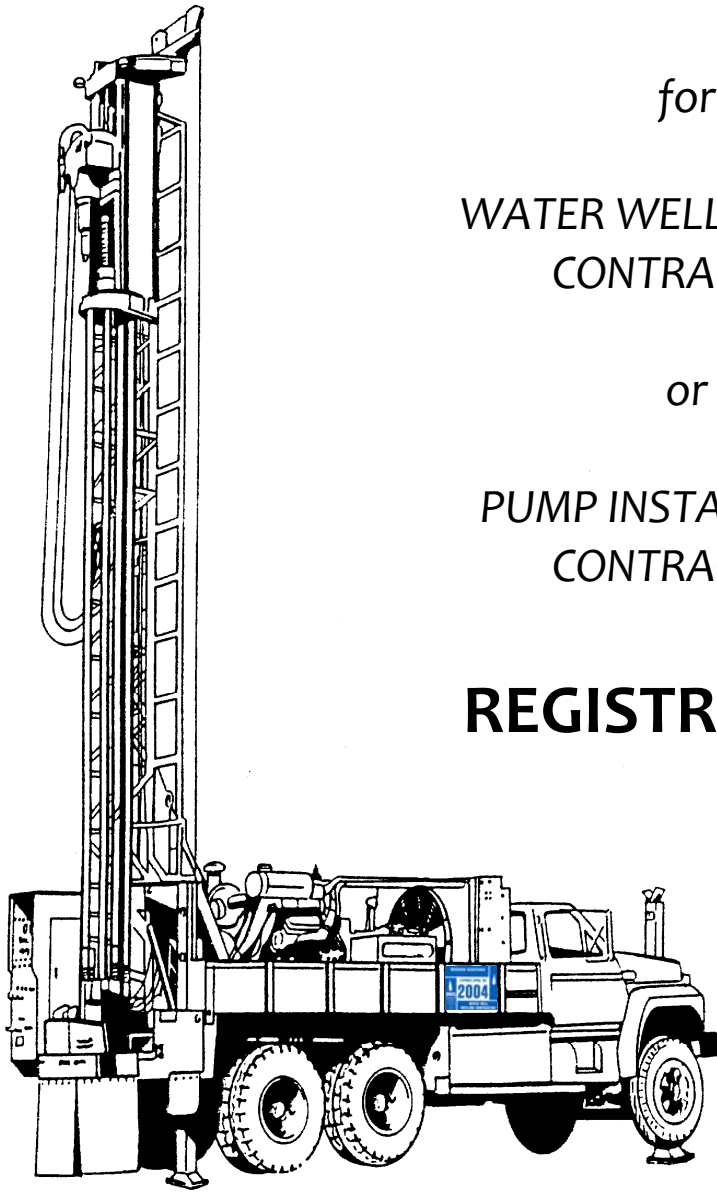
*for*

WATER WELL DRILLING  
CONTRACTOR

*or*

PUMP INSTALLATION  
CONTRACTOR

# REGISTRATION



Michigan Department of Environmental Quality  
Resource Management Division  
Drinking Water and Environmental Health Section  
Well Construction Program



MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
Resource Management Division  
Drinking Water and Environmental Health Section

**PROCEDURES FOR WELL DRILLER  
AND PUMP INSTALLER REGISTRATION**

**LEGAL BASIS**

Before engaging in the business of water well drilling, pump installing, or constructing dewatering wells, a person shall obtain a **Certificate of Registration** annually from the Michigan Department of Environmental Quality (MDEQ). These requirements are set forth in Part 127, 1978 PA 368 (Michigan Public Health Code), Section 12704, being §333.12704 of the Michigan Compiled Laws. Failure to register is a misdemeanor pursuant to Section 12715, being §333.12715 of the Michigan Compiled Laws.

Registration is **required** for persons who install, repair, or service the following water well types:

**POTABLE WATER SUPPLY WELLS (PRIVATE OR PUBLIC)**

**IRRIGATION WELLS**

**WATER SUPPLY OBSERVATION WELLS**

**HEAT PUMP SUPPLY AND RETURN WELLS**

**INDUSTRIAL WELLS**

Registration is **not required** for persons installing:

- a. A well on their owned or leased property that will serve their own single family house or is intended for farming purposes on their own farm and where the water produced will not be used by the public or in any other residence.
- b. Water wells used solely for oil or gas well drilling or production operations.
- c. Dewatering wells used temporarily during construction that are less than 25 feet in depth and less than 2 inches in diameter.
- d. Monitoring wells, mineral wells, brine wells, test wells, storage wells, or disposal wells regulated by Part 615, 1994 PA 451 (formerly 1969 PA 315, Mineral Well Act).

**REGISTRATION CATEGORIES**

**Water Well Drilling Contractor** - Persons in this category are authorized to construct, alter, service, and repair water wells. A registered well drilling contractor may also perform the work of a pump installer without obtaining an additional **Certificate of Registration**.

**Pump Installation Contractor** - Persons in this category are authorized to install, remove, alter, and repair water pumping equipment. Persons who perform only shop work on pumps are not required to be registered. Licensed master plumbers may perform the work of a pump installer without having to obtain a pump installers registration. Pump installers may not drill, service, or repair any part of the well not directly related to the pump installation. Pitless adapters, drop pipes, packer jets, and foot valves are considered part of the pump installation. Casings and screens are well components.

**Dewatering Well Contractor** - Persons in this category are authorized to engage in construction, installation, and plugging of dewatering wells and installation and operation of dewatering well pumps.

**Dewatering Well Pump Installer** - Persons in this category are authorized to engage in installation and operation of dewatering well pumps.

## **QUALIFICATIONS**

Persons applying for registration must possess the following minimum qualifications:

1. Obtain not less than two years of full-time experience in the water well drilling field for registration as a water well driller which includes pump installation or in the pump installation field for registration as a pump installer. The experience shall have been obtained within the **last 5 years**.
2. Be not less than 18 years of age and have completed high school or submit proof of equivalent education. Up to 4 years of work experience may be substituted for equal years of education.
3. Be of sound moral character. This refers to the ability of the applicant to conduct a business in a fair, honest, and open manner.

## **APPLICATION FILING PROCEDURES**

An applicant must submit the following not later than 60 days before the examination date:

1. **Registration Application, Work History Form**, and at least two **Reference Statements**, one of which shall be from a Michigan Registered Water Well Drilling Contractor. (These forms are included in this booklet).
2. Water well records for at least **20 water wells and pumps installed** by the applicant shall be submitted. A pump installer applicant shall submit at least 20 pump records. The records shall demonstrate completion of work by the applicant over a period of not less than 2 years and not more than 5 years. The dates of completion on the records are to correspond to the same years as the submitted W-2s.
3. Proof of work experience as a water well driller or pump installer must be provided. At least 2 years of the last 5 years of W-2 wage statement forms, paycheck stubs, employers' payroll records, Workers' compensation insurance records, or any combination of the above must be submitted. These forms must indicate employer's name and occupation of applicant. **These confidential records will not be retained by the MDEQ and will be returned to you after you become registered.**
4. All forms must be completed in a clear, legible manner. Any form that does not contain sufficient information, or is unreadable, will be returned to the applicant.
5. An application fee, which includes the first year of registration (or remainder until April 30) is required. Make checks payable to the **STATE OF MICHIGAN. Do not send cash.**

FEES: WATER WELL DRILLING CONTRACTOR.....\$40 (includes 1 drilling machine)  
ADDITIONAL WELL DRILLING MACHINE.....\$10  
PUMP INSTALLATION CONTRACTOR.....\$25

## **OUT-OF-STATE APPLICANTS**

An applicant who is not a resident of Michigan and is a licensed or registered well driller or pump installer in their state of residence, is eligible for registration in Michigan if all of the following requirements are met:

1. Proof of current licensure or registration is submitted to the MDEQ.
2. Applicant is in good standing in the state in which the license is held.
3. Applicant shall meet the minimum qualifications and follow the application filing procedures listed above, with the following exceptions:
  - a. A **Reference Statement** from a Michigan registered water well driller or pump installer is **not** required. At least one **Reference Statement** from a well driller or pump installer who is licensed in the applicant's state of residence must be submitted.
  - b. The **Work History** form shall be reviewed by the agency that is responsible for regulating water well construction in the applicant's state of residence.

## **STUDY MATERIALS**

The recommended study materials for contractors seeking registration are the **Water Well Construction and Pump Installation Code Book** and the **Water Well Manual**. They are both available on the MDEQ website [www.michigan.gov/deqwaterwellconstruction](http://www.michigan.gov/deqwaterwellconstruction). The Code Book is also available by contacting the Well Construction Program at 517-241-1377. Enclosed is a listing of Suggested Water Well and Pump Publications. The Course Manual is also provided when you enroll for the course (see information on last page).

## **GROUND WATER AND WELLS FUNDAMENTALS COURSE:**

Each winter the Michigan Ground Water Association, Inc. (MGWA), sponsors a course that prepares contractors for the registration exam. Among the topics covered in the two-day course are: water supply regulations, hydrogeology, well construction methods, pump and pressure tank fundamentals, and plugging abandoned wells. For information on this course, please contact the MGWA by phone at 231-767-9355 or by email at [mgwa@comcast.net](mailto:mgwa@comcast.net).

## **EXAMINATIONS**

A hands-on submersible pump electrical troubleshooting exercise and written examination must be completed by all new applicants. The exercise and exam are given each April and October in Lansing. (Contact the MDEQ, Well Construction Program, at 517-241-1389 for exact dates.)

## **HANDS-ON EXERCISE**

The hands-on submersible pump electrical troubleshooting exercise tests whether an applicant can correctly diagnose electrical problems such as a faulty main motor winding, broken motor lead, or damaged wire insulation. The applicant will have 20 minutes to complete the exercise. It is recommended that the applicant bring his/her own meters. If the applicant does not bring a meter, one will be provided. (See the next page for more information about the exercise.)

## **WRITTEN EXAMINATION**

The written examination consists of 200 multiple choice and true/false questions. A score of at least 70 percent is required to pass the written exam. The exam begins at 1:00 p.m., after completion of the Hands-on exercise in the morning. Four hours are allowed to complete the exam. Applicants are notified of the exam results within 30 days of the exam. Those who fail the written exam must wait at least 30 days before retaking it. A \$25 reexamination fee is required to repeat the written exam.

## **SUBMIT APPLICATION**

Applications must be received **at least 60 days** before the exam date. If the application is complete, you will be notified in writing of your scheduled oral interview time and location. You will also be notified if the application is incomplete. Be sure to make a copy for your records.

Mail applications to:

**MI DEPT OF ENVIRONMENTAL QUALITY  
CASHIERS OFFICE - RMD - WD  
PO BOX 30657  
LANSING MI 48909-8157**

Make check payable to: **State of Michigan**

*If you have a disability and require some accommodation in taking the registration examination, be sure to ask for a "Request for Accommodation" form from the MDEQ when you submit your application. If accommodation is not requested in advance, we cannot guarantee the availability of accommodation on site.*

## **ANNUAL RENEWAL**

Certificates of Registration expire on April 30 of each year. The MDEQ mails renewal applications in February. Completed applications must be submitted by March 1. After July 1, a late registration penalty of 50 percent of the basic registration fee is added. A Certificate of Registration that has expired because of failure of the applicant to renew may be reinstated within two years of the expiration, if back fees and late registration penalty fees are paid. Reinstatement after a two-year expiration period requires a candidate to meet the requirements of a new applicant. **Michigan does not have a provision for an inactive registration or retired status.** To be sure you receive your renewal application, promptly notify the MDEQ of any mailing address changes.

## **SUBMERSIBLE PUMP MOTOR ELECTRICAL TROUBLESHOOTING EXERCISE**

The examination to become a **Michigan Registered Water Well Drilling Contractor** or **Pump Installer** includes a hands-on submersible pump electrical troubleshooting exercise. The exercise tests whether an applicant can correctly diagnose an electrical problem such as a faulty main motor winding, broken motor lead, or damaged wire insulation.

A test device simulating a typical domestic wellhead and test meters will be furnished. Applicants are welcome to bring their own electrical meters. The test device (Wellhead Simulator) is ***not*** energized and there is no electrical shock hazard. The hands-on exercise involves testing the resistance of motor windings and power source wiring insulation by simulating actual field conditions.

Applicants should (1) have experience field or bench testing pump electrical systems, (2) understand how to adjust electrical meters to their appropriate settings, and (3) be able to understand charts showing the specifications for particular motor models. Once the meter readings are obtained, the applicant is expected to interpret the readings by comparing them to the motor specifications and make decisions about the condition of the pump. Knowledge of basic electrical terms (i.e., volts, amps, watts, ohms, ground, conductor, and resistance) is advised.

Training on pump troubleshooting is available through the ***Ground Water & Wells Fundamentals Course***, cosponsored by the Michigan Ground Water Association, Inc. Information about the course dates, location, and cost can be obtained by calling the MGWA at 213-767-9355.

Pump troubleshooting training materials are also available from pump or motor manufacturers. Some examples are Franklin Electric's ***Submersible Pump Motor Application, Installation, Maintenance Manual***, available online at [www.franklin-electric.com/Manual/contents.html](http://www.franklin-electric.com/Manual/contents.html). or Goulds Pump's ***Single Phase Service Manual for Jets and Subs***, at [www.goulds.com/pdf/GSSINGLE.pdf](http://www.goulds.com/pdf/GSSINGLE.pdf).

This page is left intentionally blank.



**Michigan Department of Environmental Quality  
Resource Management Division  
Drinking Water and Environmental Health Section**

**REGISTRATION APPLICATION FORM**

*(Please check one)*

- WATER WELL DRILLING CONTRACTOR - \$40**  
(Includes Pump Installation Activities)
- PUMP INSTALLATION CONTRACTOR - \$25**
- DEWATERING WELL DRILLING CONTRACTOR - \$40**  
(Includes Dewatering Pump Installation Activities)
- DEWATERING WELL PUMP INSTALLATION CONTRACTOR - \$25**

**IMPORTANT NOTE:**

*A complete application includes the following:*

- Registration Application Form
- Work History Form
- Two Reference Statements
- Verification of 2 years experience
- Minimum of 20 Water Well and Pump Records

***(Please type or print in ink. Complete all sections and sign on the bottom of the last page.)***

**APPLICANT INFORMATION:**

Name: _____				
Last	First	Middle Initial		
Address _____				
	City	State	ZIP	County
Telephone _____				
	Location (home, shop, office, etc.)	E-mail address	Date of Birth	
Position with Company: <input type="checkbox"/> owner <input type="checkbox"/> partner <input type="checkbox"/> officer <input type="checkbox"/> full-time employee <input type="checkbox"/> other _____				

**BUSINESS INFORMATION:**

Business Type: <input type="checkbox"/> sole owner <input type="checkbox"/> partnership <input type="checkbox"/> corporation <input type="checkbox"/> government <input type="checkbox"/> other _____				
Proposed Business Name _____				E-Mail Address _____
Business Address _____				
	City	State	ZIP	County
Business Telephone _____				
	Mobile Phone No.		FAX No.	
Branch office address and telephone _____				

**APPLICATIONS ARE DUE 60 DAYS BEFORE THE EXAM DATE**

**Please send application and check payable to the State of Michigan to:**

**MI DEPT OF ENVIRONMENTAL QUALITY  
CASHIERS OFFICE-RMD-WD  
PO BOX 30657  
LANSING MI 48909-8157**

**For Cashier's Use Only: 37000-40567-9406**

**EXPERIENCE:**

**QUALIFICATIONS:** Work experience must equal at least 2 years of full-time work (4,000 hours) within the last 5 years.

**REFERENCE:** R 325.1701 Rule 201(a)(b)(c)(d).

Do you have at least 2 years of full-time experience in the water well drilling industry?  Yes  No

If yes, number of years in well drilling industry \_\_\_\_\_

**PROOF OF WORK EXPERIENCE:** Proof of experience shall be documented by submitting all of the following:

**REFERENCE:** R 325.1701a Rule 201a.

*Check list:*

- \_\_\_\_\_ A minimum of 20 Water Well and Pump Records signed by the registered contractor with your name as the drilling machine operator and pump installer.
- \_\_\_\_\_ Work History Form with local health department review and signature (form included in this booklet).
- \_\_\_\_\_ Two notarized reference statements (form included in this booklet). One must be from a Michigan Registered Water Well Drilling Contractor.
- \_\_\_\_\_ Reference statements from relatives cannot be accepted.
- \_\_\_\_\_ Verification (federal W-2 forms, paycheck stubs, employers' payroll records, health insurance records, or any combination that verifies 2 years of experience within the last 5 years).

Have you ever been convicted of a felony or misdemeanor or entered a plea of guilty or nolo contendere?  Yes  No

Have you ever had a judgment against you resulting from a civil action related to well drilling or pump installing?  Yes  No

List other state(s) in which you are licensed as a water well driller or pump installer.

State \_\_\_\_\_ County \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

Has your license ever been suspended or revoked?  Yes  No

**EDUCATION:**

High School (Name and Location) \_\_\_\_\_

Highest Grade Completed (circle) 1 2 3 4 5 6 7 8 9 10 11 12 Year graduated \_\_\_\_\_

College (Name and Location) \_\_\_\_\_ Degree and Major \_\_\_\_\_

College Years Completed \_\_\_\_\_ Year Graduated \_\_\_\_\_ Not Graduated \_\_\_\_\_

**OTHER TRAINING AND EDUCATION:** List any short courses, conferences, or college courses related to the well drilling field.

Note: Training courses **cannot** be substituted for minimum required field experience.

Course Title	Instructor	Location	Year
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**PERSONAL REFERENCES:** List persons with knowledge of applicant's water well drilling experience.

Name	Address	Phone
Name	Address	Phone
Name	Address	Phone

**DRILLING MACHINE(S):** list additional drilling machines on separate sheets.

Do you intend to register any drilling machines?  Yes  No If yes, how many? \_\_\_\_\_

If yes, please provide the following information:

Make of Drilling Machine	Model	Serial Number
--------------------------	-------	---------------

Type (cable tool, rotary, jetting, hollow rod, auger, etc.)

Truck Mounted:

Make of Truck	Year	Vehicle No.	No. of Rear Axles
---------------	------	-------------	-------------------

License Plate No.	State	Year
-------------------	-------	------

Trailer Mounted:

Make of Trailer	Serial No.	Body Style	No. of Axles
-----------------	------------	------------	--------------

License Plate No.	State	Year
-------------------	-------	------

*NOTE: Registration of one drilling machine is included in initial \$40 fee. Additional machines are \$10 each.*

I certify that all information in this application and the Work History form are true and accurate. I understand that any false statements will result in the denial of the application or renewal of the registration certificate, and/or may include criminal prosecution. I will supervise all water well drilling and pump installation activities and certify that all well/pump installations will adhere to the Groundwater Quality Control Rules and well code, R325.1601 *et seq.*, and other applicable state and local regulations. I will notify the Michigan Department of Environmental Quality (MDEQ) if I am no longer the registered well drilling contractor/pump install for the firm, or I am no longer employed in a supervisory role, or if my firm name or address changes.

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_



Michigan Department of Environmental Quality  
Resource Management Division  
Drinking Water and Environmental Health Section

**WORK HISTORY FORM**  
for Water Well Drilling/Pump Installation Contractor Registration

Name of Applicant

Name of Present Employer

Registration Number

YEAR	* WEEKS WORKED PER/YR	* HOURS PER WEEK	NAME OF FIRM	BRIEFLY DESCRIBE YOUR DUTIES	COUNTIES WORKED
<b>TOTAL</b>			<i>* Applicant must have a minimum of 100 weeks (or 4,000 hours) of verifiable work experience within the last 5 years.</i>		

List the following information for wells you drilled (you operated the water well drilling rig).  
 For Pump installers applicants, complete columns - Number of pumps, type of Wells, Type of Pumps

DRILLING METHOD	NUMBER OF WELLS (Pumps)	WELL DIAMETER(S)	WELL DEPTH (FT) (RANGE)	TYPES OF WELLS (PRIVATE, IRRIGATION, PUBLIC, ETC.)	TYPE OF PUMPS (SUBMERSIBLE, JET, CENTRIFUGAL, HAND PUMPS, TURBINE, ETC.)

**FOR LOCAL HEALTH DEPARTMENT OR OUT-OF-STATE LICENSING DEPARTMENT USE ONLY**

*Please review the applicant's work history and answer the following questions:*

- YES       NO      Are you familiar with the firm where the applicant was/is employed?
- YES       NO      Has the applicant performed all water well and pump work according to the Michigan Water Well Construction and Pump Installation Code (or applicable regulations for out-of-state applicants)?
- YES       NO      Is the applicant familiar with all applicable local regulations?
- YES       NO      Has the applicant's well drilling license ever been revoked, suspended, or denied?
- YES       NO      Do you recommend the applicant for registration?

COMMENTS \_\_\_\_\_

REVIEWERS NAME \_\_\_\_\_

AGENCY \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_



**Michigan Department of Environmental Quality  
Resource Management Division  
Drinking Water and Environmental Health Section**

**REFERENCE STATEMENT**

for Water Well Drilling/Pump Installation Contractor Registration

Name of Applicant \_\_\_\_\_

Recommendation for:       Well Drilling Contractor       Pump Installation Contractor

1. How long have you known the applicant? \_\_\_\_\_

2. What is your association with the applicant?

Employee       Acquaintance       Business associate

Other \_\_\_\_\_

3. How long was applicant employed by you? \_\_\_\_\_

4. What tasks did the applicant perform for you? \_\_\_\_\_

5. Have you ever personally observed the applicant's work?       Yes       No

6. Is this individual able to operate a water well drilling/pump installation business in an acceptable manner?

Yes       No

7. How long has the applicant been working in the water well drilling field?

Less than 2 years       2-5 years       5-10 years       10+ years

8. Additional Comments: \_\_\_\_\_

9. Enter your choice from Column B that best applies to the applicant.

**COLUMN A**

- \_\_\_\_\_ Honesty
- \_\_\_\_\_ Dependability
- \_\_\_\_\_ Judgment
- \_\_\_\_\_ Workmanship
- \_\_\_\_\_ Ability to deal with public
- \_\_\_\_\_ Knowledge of water well drilling
- \_\_\_\_\_ Knowledge of pump installing

**COLUMN B**

- 5 = Excellent
- 4 = Above Average
- 3 = Average
- 2 = Below Average
- 1 = Poor

(NOTE: Reference statements from relatives cannot be accepted.)

I certify that the facts stated above are true to the best of my personal knowledge and belief and that I have not accepted payment from the applicant for completion of this form.

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Firm Name \_\_\_\_\_

Well Driller # \_\_\_\_\_ Pump Installer # \_\_\_\_\_

Address \_\_\_\_\_

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

Telephone # \_\_\_\_\_ Date \_\_\_\_\_

*NOTE: This form must be notarized and returned no later than 60 days prior to written exam date.*

Subscribed and sworn before me this \_\_\_\_\_  
day of \_\_\_\_\_, 20\_\_\_\_\_, a Notary Public  
in and for \_\_\_\_\_ County,  
\_\_\_\_\_  
(State)

\_\_\_\_\_  
Signature, Notary Public  
My Commission expires \_\_\_\_\_, 20 \_\_\_\_\_

**IF MAILING REFERENCE STATEMENT SEPARATE FROM APPLICATION, PLEASE SEND TO:**

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
RESOURCE MANAGEMENT DIVISION  
DRINKING WATER & ENVIRONMENTAL HEALTH SECTION  
PO BOX 30241  
LANSING MI 48909-7741



**Michigan Department of Environmental Quality  
Resource Management Division  
Drinking Water and Environmental Health Section**

**REFERENCE STATEMENT**

for Registration of  
Water Well Drilling/Pump Installation Contractor

Name of Applicant \_\_\_\_\_

Recommendation for:       Well Drilling Contractor       Pump Installation Contractor

5. How long have you known the applicant? \_\_\_\_\_

6. What is your association with the applicant?

Employee       Acquaintance       Business associate

Other \_\_\_\_\_

7. How long was applicant employed by you? \_\_\_\_\_

8. What tasks did the applicant perform for you? \_\_\_\_\_

5. Have you ever personally observed the applicant's work?       Yes       No

6. Is this individual able to operate a water well drilling/pump installation business in an acceptable manner?

Yes       No

10. How long has the applicant been working in the water well drilling field?

Less than 2 years     2-5 years     5-10 years     10+ years

11. Additional Comments: \_\_\_\_\_

12. Enter your choice from Column B that best applies to the applicant.

**COLUMN A**

- \_\_\_\_\_ Honesty
- \_\_\_\_\_ Dependability
- \_\_\_\_\_ Judgment
- \_\_\_\_\_ Workmanship
- \_\_\_\_\_ Ability to deal with public
- \_\_\_\_\_ Knowledge of water well drilling
- \_\_\_\_\_ Knowledge of pump installing

**COLUMN B**

- 5 = Excellent
- 4 = Above Average
- 3 = Average
- 2 = Below Average
- 1 = Poor

(NOTE: Reference statements from relatives cannot be accepted.)

I certify that the facts stated above are true to the best of my personal knowledge and belief and that I have not accepted payment from the applicant for completion of this form.

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Firm Name \_\_\_\_\_

Well Driller # \_\_\_\_\_ Pump Installer # \_\_\_\_\_

Address \_\_\_\_\_

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

Telephone # \_\_\_\_\_ Date \_\_\_\_\_

*NOTE: This form must be notarized and returned no later than 60 days prior to written exam date.*

Subscribed and sworn before me this \_\_\_\_\_  
day of \_\_\_\_\_, 20\_\_\_\_\_, a Notary Public  
in and for \_\_\_\_\_ County,  
\_\_\_\_\_  
(State)

\_\_\_\_\_  
Signature, Notary Public  
My Commission expires \_\_\_\_\_, 20\_\_\_\_\_

**IF MAILING REFERENCE STATEMENT SEPARATE FROM APPLICATION, PLEASE SEND TO:**

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
RESOURCE MANAGEMENT DIVISION  
DRINKING WATER & ENVIRONMENTAL HEALTH SECTION  
PO BOX 30241  
LANSING MI 48909-7741

Department of Environmental Quality  
Dan Wyatt Director  
Environmental Assistance Center 1-800-662-9278

State of Michigan  
Rick Snyder, Governor

Printed by Authority of 1978 PA 368  
Total number of copies printed: 200 Total Cost: \$349.40 Cost per copy: \$.65  
Michigan Department of Environmental Quality

The Michigan Department of Environmental Quality (MDEQ) will not discriminate against any individual or group on the basis of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. Questions or concerns should be directed to the MDEQ Office of Personnel Services, P.O. Box 30473, Lansing, MI 48909.