

Rec. by _____
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 Receipt # _____
 Approval List _____

STATE OF UTAH

Department of Natural Resources

Division of Water Rights



APPLICATION FOR DRILL RIG OPERATOR REGISTRATION For the Year _____



Do not fill out this form until you have read and understand the most recent version of the “State of Utah Administrative Rules for Well Drillers” and other reference materials found in the Well Drillers Licensing Packet. Make checks payable to Utah Division of Water Rights. Send application to: Utah Division of Water Rights, PO Box 146300, SLC UT 84114-6300

Application, with an initial statutory \$100 filing fee for consideration of the issuance of a Utah Drill Rig Operator Registration, is hereby filed with the Office of the State Engineer to engage in the practice of drilling, constructing, repairing, cleaning, deepening, and abandoning wells for the purpose of utilizing or monitoring underground water in accordance with Utah Code § 73-3-25 Annotated 1953, as amended.

Name	Company Name:
Mailing Address:	City/State ZIP Code:
Business Phone:	Residence Phone:
Cell Phone:	FAX Number:
Date of Birth:	E-Mail Address

Applicant requests licensure to construct wells using the following drilling rig(s) or method(s) (Check all that apply):

- | | | |
|--|--|---------------------------------------|
| Air Rotary <input type="checkbox"/> | Mud Rotary <input type="checkbox"/> | Cable Tool <input type="checkbox"/> |
| Flooded Reverse <input type="checkbox"/> | Dual Wall Reverse <input type="checkbox"/> | Auger/Boring <input type="checkbox"/> |
| Jetting/Driving <input type="checkbox"/> | Percussion Hammer <input type="checkbox"/> | Sonic <input type="checkbox"/> |
| Other: _____ | | Direct Push <input type="checkbox"/> |

Applicant plans to construct monitor wells: Yes or No .

RECORD OF DRILLING EXPERIENCE

Describe your drilling experience in the table below. Use the back of this page if additional room is necessary to describe experience.

Drilling Method ¹	Rig Make/Model	Number of Wells Drilled	Total Hours as Apprentice (Helper)	Total Hours as Operator	Total Years/Months Experience

¹Drilling Methods include: Air Rotary, Mud Rotary, Cable Tool, Reverse Rotary, Auger, Becker Hammer, Dual Wall Reverse, Rotasonic, or other (specify).

Describe your experience, training, and responsibilities relative to operation of well drilling equipment and well construction. (Use back of page if needed)

References: List the name and address of two (2) persons who can attest to your understanding and experience related to well drilling and construction. By signing this application, the applicant gives the State Engineer's Office permission to contact the listed references.

1. _____

(Name)	(Phone No.)	(Utah Well Driller License No., if applicable)
(Street Address and/or PO Box)	(City)	(State) (Zip Code)

2. _____

(Name)	(Phone No.)	(Utah Well Driller License No., if applicable)
(Street Address and/or PO Box)	(City)	(State) (Zip Code)

Registered Drill Rig Operators must work under the direct supervision of a Utah-licensed well driller. List the Utah-licensed well driller(s) with whom you intend to work.

Utah Well Driller	License No.

