

WA302*

Rights in Water and Irrigation Act 1914

Rights in Water and Irrigation Amendment Regulations (No. 2) 2009

Made by the Governor in Executive Council under the *Water Agencies (Powers) Act 1984* section 37 and the *Rights in Water and Irrigation Act 1914*.

1. Citation

These regulations are the *Rights in Water and Irrigation Amendment Regulations (No. 2) 2009*.

2. Commencement

These regulations come into operation as follows —

- (a) regulations 1 and 2 — on the day on which these regulations are published in the *Gazette*;
- (b) the rest of the regulations — on the day after that day.

3. Regulations amended

These regulations amend the *Rights in Water and Irrigation Regulations 2000*.

4. Schedule 3 amended

Delete Schedule 3 Form 2 and insert:

Form 2

[r. 39]

Rights in Water and Irrigation Act 1914
Water Agencies (Powers) Act 1984

**Information to be provided under the
Rights in Water and Irrigation Act 1914 s. 26E after constructing
or deepening a non-artesian well**

Part 1: Details of any licence granted for the work under the <i>Rights in Water and Irrigation Act 1914</i> section 26D	
Licence No:	
Licencee's full name	

Part 2: Details of the person who carried out the work	
Company, corporate, trading or business name of person who carried out the work (Full name)	
Driller's name (Full name)
Postal Address:
Business Phone:
Business Fax:
Mobile Phone:
Email:

Part 3: Location of well
Property address of well

Well coordinates: GPS reading Estimate

Zone	<input type="text"/>	Easting/ Latitude	<input type="text"/>	Northing/ Longitude	<input type="text"/>
		Datum	<input type="text"/>	GPS reliability	<input type="text"/>

Location plan: please sketch below a plan showing the position of the well in relation to buildings, boundaries, roads, nearest cross roads and any other features or information to assist in locating the well.*

Part 4: Construction details
Note: <i>All measurements to be taken from ground level.</i>
Well construction diagram: please sketch below a diagram showing the construction of the well.*

Production casing details					
Material	Nominal bore	Diameter O.D (mm)	Wall thickness (mm)	Depth	
				From (m)	To (m)

Screens/slots				
Screens/slot (Type)	Diameter O.D (mm)	Aperture (mm)	Top of screen (m)	Bottom of screen (m)

Gravel pack details		
Gravel size (mm)	From (m)	To (m)

Annular fill		
Material Type	From (m)	To (m)

Cementing detail

Pressure cement grouted Tremmie

Casing diameter (mm O.D)	Depth	
	From (m)	To (m)

Total depth drilled (from ground level)

Geophysical log required as condition of licence?

Yes
 No

Geophysical log taken? (If so, attach log and contractor details)

Yes
 No

From (m)	To (m)	Strata description.*

Part 5: Particulars of well			
Well name / number			
Drilling start ¹		Drilling completion ²	

1. Drilling start date refers to the date drilling begins. Do not include set up date. 2. Drilling completion date includes well development and testing.

Drilling method used	<input type="checkbox"/> Rotary air <input type="checkbox"/> Cable tool <input type="checkbox"/> Auger <input type="checkbox"/> Rotary mud <input type="checkbox"/> Sludge <input type="checkbox"/> Other (specify) _____		
Final status of well	<input type="checkbox"/> Ready to operate <input type="checkbox"/> Decommissioned <input type="checkbox"/> Other (specify) _____		
Purpose (use) of well	<input type="checkbox"/> Production <input type="checkbox"/> Investigation <input type="checkbox"/> Monitoring <input type="checkbox"/> Other (specify) _____		

Part 6: Well development			
Date (dd/mm/yy)		Duration of development hours
Method	<input type="checkbox"/> Airlift <input type="checkbox"/> Pump <input type="checkbox"/> Jetting <input type="checkbox"/> Surging		
Development pump rate (e.g. L/s, m ³ /day)			

Part 7: Pump testing (If applicable)					
Date start (dd/mm/yy)		Date end (dd/mm/yy)		Duration of test hours
<input type="checkbox"/> Step test <input type="checkbox"/> Constant rate <input type="checkbox"/> Other					
Constant rate - Pump rate (e.g. m ³ /day)		Pump type (e.g. submersible)			
		Water rest level prior to test (m)			
Measurements taken from <input type="checkbox"/> Top of casing (TOC) <input type="checkbox"/> Ground level (GL) <input type="checkbox"/> Other (specify) _____					
Elevation of measurement reference point if known (metres AHD)		<input type="checkbox"/> GPS <input type="checkbox"/> Estimate <input type="checkbox"/> Other (specify) _____			
Final drawdown	m	Recommended supply (e.g. m ³ /day)			
Final drawdown is the distance between the static water level measured prior to the test and the water level measured at the end of the pumping test.					

Comments

Part 8: Field samples			
Collection method (e.g. pump test, airlift)			
Conductivity (e.g. mS/m)		<input type="checkbox"/> Temperature compensated <input type="checkbox"/> Temperature uncompensated	pH
Water temperature at test			

Comments

Part 9: Lab samples			
Lab samples taken (Please attach)	<input type="checkbox"/> Yes <input type="checkbox"/> No	TDS (e.g. mg/l)	Please submit samples separately to form if not received before the one month submission deadline.

Part 10: Water levels			
SWL (Static water level)	m	Water cut at	m
Measurements taken from	<input type="checkbox"/> Top of casing (TOC) <input type="checkbox"/> Ground level (GL) <input type="checkbox"/> Other (specify)		
Date of reading (dd/mm/yy)			

Comments

Part 11: Declaration and signature	
Capacity of person making declaration [tick one box]	<input type="checkbox"/> An individual who carried out the work. <input type="checkbox"/> An officer who is a director or secretary of a corporation that carried out the work. <input type="checkbox"/> other [describe]

I, _____ (name of person making declaration) declare that the information provided on this form is true and correct.

Signature of person making declaration

Date

* If there is insufficient space, please use, and attach, a separate page.

By Command of the Governor,

R. KENNEDY, Clerk of the Executive Council.
