



Well / Pump Inspection Field Report

Inspection Done By: _____ Well ID: _____ Date: _____

Contact Information:

Name: _____ Phone: _____

Email: _____

Address: _____ City/Zip Code: _____

Location / Physical Description: _____

Type of well: _____ Residential _____ Commercial Community (how many households on well? _____)

Power Supply: _____ Utility Company _____ Solar _____ Generator Other: _____

Is well located: _____ Outside _____ Pump House _____ Shed _____ Garage Other: _____

Are there any obstacles for accessing the well for service? _____ Yes _____ No

If yes, please explain: _____

Pump Information:

Pump 1 – Type: _____ Submersible _____ Jet/Booster Pump Make / Model: _____ HP: _____

_____ AC Power _____ DC Power Volts: _____ Phase: _____ Hertz: _____ Pump Capacity (gpm): _____

Control Box Make / Model: _____ Any Pump-tec/Protection Device: _____

Mag Contactor: _____ Yes _____ No Wire Size from Pump: _____ Appear to be properly grounded? _____ Yes _____ No

Starting Amps: _____ Running Amps: _____ Date Installed: _____

Pump 2 – Type: _____ Submersible _____ Jet/Booster Pump Make / Model: _____ HP: _____

_____ AC Power _____ DC Power Volts: _____ Phase: _____ Hertz: _____ Pump Capacity (gpm): _____

Control Box Make / Model: _____ Any Pump-tec/Protection Device: _____

Mag Contactor: _____ Yes _____ No Wire Size from Pump: _____ Appear to be properly grounded? _____ Yes _____ No

Starting Amps: _____ Running Amps: _____ Date Installed: _____

Pump Depth: _____ Depth to Water: _____ Well Depth: _____

Pressure Switch / Starter Condition: _____ New _____ Good _____ Fair _____ Bad _____ Damaged

Is there a pressure gauge: _____ Yes _____ No Pressure Switch Cut in (psi): _____ Cut out (psi): _____

Is there adequate pressure _____ Yes _____ No

2566 N. Calle Primero, Huachuca City, AZ 85616

Phone: (520) 456-9377

E-mail: triplelwell@gmail.com

ROC: 328421

Pressure Tank:

Tank Make / Model: _____ Type: ☐ Standard ☒ Captive Air ☐ None (*gravity flow*)
How many tanks: _____ Tank Size (gallons): _____ Date on Tank(s): _____
Pressure Tank Check: Air Pressure (psi): _____ Is tank heavy or possibly waterlogged/damaged: ☐ Yes ☐ No
Is there any Holding Tank(s): ☐ Yes ☐ No Holding Tank Size (gallons): _____
Is there a Pump inside the Tank? ☐ Yes ☐ No Any Floats / Shutdown Device: ☐ Yes ☐ No
Size of water pipe from well: _____ Pipe Material: ☐ PVC ☐ Steel ☐ Poly ☐ Other
(explain): _____
Is system insulated for cold weather? ☐ Yes ☐ No
Any areas that need to be insulated? ☐ No ☐ Yes (explain): _____

Recommendations for System / Notes:

The information on this well inspection report is a Field Report. This information is gathered from running tests and diagnostics from the pump. Some information on this report might be incomplete if Triple L Well & Pump Service, LLC does not have this information already on file. It can only be obtained from the homeowner or the company that originally installed the system. A Complete Well Inspection Report can be done by removing the pump from well and then doing diagnostics; this is not necessary in most situations. If you wish to know more information that what is stated on this Field Report, please contact our office during normal business hours at (520) 456-9377 or via email at triplelwell@gmail.com. You can also visit the Arizona Department of Water Resources at <https://new.azwater.gov/> to find more information that may be on file for this well.