

MONTANA BOARD OF WATER WELL CONTRACTORS

EXAMINATION PROCEDURES

For Water Well Contractor,
Monitoring Well Constructor,
Or Water Well Driller

Please return the completed application form, along with evidence of one year of apprenticeship or equivalent experience.

The examination may be taken (by appointment only) any weekday, Monday through Friday, in the Board's Office, 1424 9th Avenue, Helena. The examination may also be taken at any of the Department of Natural Resources and Conservation Water Resources Regional Offices. Locations are listed on the front of the application form. The examination must be started between 8:00 am and 1:00 pm to allow you sufficient time to complete the exam. You will be notified of the proper person to contact to schedule a time and place to take the exam.

It is not necessary to file the bond at the time of application. The bond is required for water well contractors and monitoring well constructors after successful completion of the exam and prior to issuance of the license. A driller is not required to submit a bond, but must be in the employ of a Montana licensed water well contractor.

The water well driller's examination contains 135 questions based on the knowledge of Montana laws and rules, general hydrogeology, geology and drilling practices for cable tool and rotary rigs. The monitoring well constructor's examination contains 100 questions on Montana laws and rules, general hydrogeology, monitoring well construction, geology and site safety. The water well contractor's exam contains 200 questions and incorporates all the topics described above for the both the driller's and monitoring well constructor's exam. The exam format is primarily multiple choice and true and false, with a few short answer questions. A passing score of 80 percent is required for licensure.

The exam fee may be paid on line using a credit card. A convenience fee will be added to the payment. The link to pay on line can be found on the Board's web page: <http://bwwc.mt.gov>

The Administrative Rule Book that includes licensing procedures, disciplinary procedures and construction standards is available from this office upon request and receipt of payment. The cost is \$10.00. You can also access this information from the Board of Water Well Contractor's website at: <http://bwwc.mt.gov>. If you have any questions, please contact the Board's office at (406)-444-6643.

APPLICATION

FOR WATER WELL CONTRACTOR'S (WWC), MONITORING WELL CONSTRUCTOR'S (MWC), OR WATER WELL DRILLER'S LICENSE (WWD)

Check the type of license for
which you are applying:

- ☐ Water Well Contractor (WWC)
☐ Monitoring Well Constructor (MWC)
☐ Water Well Driller (WWD)

Appropriate fee must accompany the application.
(Make checks payable to Board of Water Well Contractors)

\$575
\$575
\$475

Check the city in which you wish to take the examination:

____ Billings ____ Bozeman ____ Glasgow ____ Havre
____ Helena ____ Kalispell ____ Missoula

Full Name _____

Company Name _____

If applying for a driller's license,
please give the name of the contractor for whom you work for: _____

Applicant's Business Address (physical location) _____

City _____ ST _____ Zip Code _____

Business Mailing Address (if different from above) _____

City _____ ST _____ Zip Code _____

Business Phone: _____ Cell Phone: _____

Fax: _____ E-Mail: _____

Under what Contractor did you serve your apprenticeship? _____

Have you ever been licensed as a water well contractor, driller, or monitoring well constructor? ____Yes ____No

If so, where? _____ License number _____

What kind of license did you have? _____

Your license was valid from _____ through _____. Was this license obtained by examination? ____Yes ____No

Have you previously applied for a Montana water well contractor's, driller's, or constructor's license? ____Yes ____No

Was your application approved and when? _____

Have you taken this examination before: ____Yes ____No

If so, state date, type of application, and results of the examination: _____



MONTANA DEPARTMENT OF NATURAL RESOURCES AND CONSERVATION
BOARD OF WATER WELL CONTRACTORS
1424 9th Avenue P.O. Box 201601 Helena, Montana 59620-1601 (406) 444-6643

How many years have you been working in the water well drilling field? _____

Was your water well contractor's, driller's, or monitoring well constructor's license ever revoked? ____Yes ____ No

If so, by whom? _____

Give reasons: _____

Has your bond ever been revoked or forfeited or has action been taken against the bond? ____Yes ____ No

If so, explain. _____

1. Have any legal or disciplinary actions been instituted against you which allege impropriety of your past practices or your unfitness to practice? ____ Yes ____ No

2. If yes, what was the outcome of the proceedings? _____

(Failure to accurately furnish the information requested in questions 1 and 2 is grounds for denial or revocation of your license.)

CONTRACTOR APPLICANTS:

What major equipment will you use in your water well drilling business? (Description):
[attach additional sheet, if necessary]

Check if you:

	Own	Lease	Other

DRILLER APPLICANTS:

What major equipment will you operate if you become a licensed Montana water well driller? (Description):



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WATER WELL DRILLING EMPLOYMENT RECORD

IMPORTANT: Your application will be delayed unless the complete address of each employer is given.	DATES EMPLOYED		EXPLAIN WORK
	From Month year	From Month year	
PREVIOUS AND PRESENT EMPLOYERS Name _____ Address _____ City _____ State ____ Zip _____ Phone _____			
Name _____ Address _____ City _____ State ____ Zip _____ Phone _____			
Name _____ Address _____ City _____ State ____ Zip _____ Phone _____			

REFERENCES: List at least three (3) people in the water well industry who are familiar with your work and have them supply written verification of their knowledge regarding your work in the contracting or drilling field. Have them give specific information as to the type of work you have performed on site, such as supervision, design, installation, etc. Submit these letters with this application. Please note that you must supply three (3) professional references other than persons within the firm by whom you are employed.

Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone Number _____

Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone Number _____

Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone Number _____

Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone Number _____



APPLICATION REQUIREMENTS

WATER WELL CONTRACTOR

To be licensed as a water well contractor, you must supply verification of completion of at least one year of apprenticeship. Verification must be a letter from the contractor you worked for, and it must give the number, general location, and approximate date of wells you've worked on, and the dates of your employment. Technical experience may be accepted on a case by case basis, (36.21.412 Administrative Rules of Montana). A \$4,000 bond is also required if you pass the examination.

MONITORING WELL CONSTRUCTOR

Verification of one year of experience under a licensed monitoring well constructor shall include a listing of monitoring well work performed, including: name of licensed monitoring well constructor, under whose supervision the work was performed; the name of the job or company for whom the monitoring work was done; description of work, length of each job, and any other details which will verify the monitoring work. This list must accompany the completed application. Education in an area that relates to monitoring well construction may also be accepted

WATER WELL DRILLER

To be licensed, a Water Well Driller must supply verification of completing a one year apprenticeship. (See above information on verification and rule 36.21.412, Administrative Rules of Montana). Drillers also need a letter from a licensed water well contractor that states the driller will be in his employ, and his firm will be responsible for the driller's work.

OUT-OF-STATE APPLICANTS

Out-of-state applicants must fulfill the same requirements as in-state applicants. The attached form for verification of out-of-state licensure must be completed, signed, and returned by the water well licensing official in any state where you have held a previous water well driller's or contractor's license.

I hereby swear that all the information on this application is true and correct.

Date

Signature of Applicant

Note: Failure to complete any portion of this application will result in a delay in approval or disapproval. Material misstatements in this application may result in the denial or revocation of your license. If this application is approved by the Board, you will be notified regarding the date and time of the examination.

Please mail this completed form, appropriate fee, copies of your past licenses, verification letters, and any other information such as verification of technical experience or education to:

**Board of Water Well Contractors
Department of Natural Resources and Conservation
P.O. Box 201601
Helena, Montana 59620-1601**

The Board will act on the application within 90 days if the application is correct and complete, and the applicant is qualified and has paid the appropriate fee. Nothing contained in this application is confidential.



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VERIFICATION OF OUT-OF-STATE LICENSURE

The Montana Board of Water Well Contractors is seeking information on the individual whose name appears below.

This form needs to be completed, signed, and returned to this office by the water well licensing agency in the state of prior licensure.

Name of licensee: _____

Type of license: Water Well Driller # _____

Water Well Contractor # _____

Month and year first licensed: _____ through _____

Experience required to obtain license: _____

Licensed by examination: ____Yes ____No

Examination score _____ (state's passing score _____)

Licensed by reciprocity with another state: ____Yes ____No

Name of state _____

List of complaints filed and outcome: _____

Approximate number of wells drilled during licensure period, if known _____

Is license current and in good standing? ____Yes ____No

Please attach a sheet listing other information that would be helpful in evaluating applicant's experience.

Date

Signature of State Licensing Official

Return this form to:

***Board of Water Well Contractors
Department of Natural Resources and Conservation
P.O. Box 201601
Helena, Montana 59620-1601***



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