

.....**Water Well Construction**
Arkansas Department of Agriculture
Natural Resources Division
10421 W Markham Street
Little Rock, AR 72205

Requirements for Apprentice Registration

An applicant for an Arkansas Water Well Apprenticeship Certificate must submit the following:

1. Proof of age. An applicant must submit a driver's license or other documentation illustrating that he is at least 18 years old.

2. Completed application form and the \$125 registration fee.

3. A notarized letter from an Arkansas Water Well Registered Driller or Pump Installer ('Supervisor') stating

a. That the Supervisor is a full time employee of the same Arkansas Licensed Water Well Contractor as the apprenticeship applicant, holds a certificate of registration in the same construction category sought by the apprenticeship applicant, and the registrant has held the certificate for at least five of the previous ten years;

b. That the Supervisor has no outstanding civil penalties or fees owed to the Commission;

c. That the Supervisor has no record of construction violations in the relevant construction category.

d. That the Supervisor is willing to serve in a supervisory capacity during the apprenticeship;

e. The number of apprentices, including the applicant, that the supervisor currently supervises or anticipates supervising within a year of drafting the letter with the number not exceeding five; and

f. A description of the training program.

4. A written statement from a contractor employing the Supervisor whereby the contractor agrees to accept responsibility for the apprenticeship.

5. Registration fee of \$125.

Please make the check out to NRD and send to the address listed at the top of this page.

Approval of Application

The Commission will consider applications at its bi-monthly meetings. **To allow sufficient time to review applications, the Commission will delay consideration of applications received less than two weeks before a scheduled Commission meeting until the next meeting.**

The Commission will notify Applicant whether his application has been approved or disapproved.

Example of A Letter from a Registered Certificate Holder

Doe Drilling Company, Inc.
Plain Old, Arkansas 99999
Phone (501) 999-9999

January 11, 2005

Mr. Chris Colclasure, Executive Secretary
Arkansas Department of Agriculture
Attn: Fiscal
1 Natural Resources Drive
Little Rock, AR 72205

Re: Supervision of Apprenticeship Applicant Arthur Anderson

Dear Mr. Colclasure:

I certify that I, Derek Duncan, am a full time employee of the company hiring the apprentice applicant, hold a certificate of registration in the area(s) sought by the apprenticeship applicant and have held this registration for at least five of the previous ten years. I have no outstanding fines or fees owed to the Arkansas Water Well Construction Commission and no record of any construction violations, unless such violations were waived by the Commission.

I am willing to supervise Mr. Arthur Anderson, the apprenticeship applicant, during his period of apprenticeship, and I will supervise no more than five apprentices during his period of apprenticeship. Further, I am an employee of Doe Drilling Company, Inc., and Doe Drilling Company, Inc. will be hiring Mr. Anderson.

During this period of apprenticeship, I will provide Mr. Anderson with a training program that includes:

- Furnishing Mr. Anderson with the Arkansas Water Well Construction Commission Rules and the Arkansas Water Well Construction Act, Ark. Code Ann. §17-50-101 et seq.
- Briefing the apprentice in my absence on the construction techniques to be employed in each job before beginning that job
- Encouraging the apprentice to attend various factory and trade show seminars during his apprenticeship.
- Making regular visits to the job sites where the apprentice is at work to observe his work and will visit completed job sites to see that the work is performed up to code and to the standards of the Arkansas Water Well Construction Commission.
- Co-signing all construction reports with Mr. Anderson if such reports are required.

I swear and affirm that the above testimony is true.

Sincerely,

Derek Duncan
Arkansas Registered Driller # 576 .
Doe Drilling Company, Inc.

ACKNOWLEDGMENT

STATE OF _____)
) ss
COUNTY OF _____)

Before me on the _____ day of _____, _____, appeared _____ and
subscribed and sworn before me this Acknowledgement.

NOTARY PUBLIC

MY COMMISSION EXPIRES

(S E A L)

Arkansas Water Well Apprenticeship Registration Application

Incomplete or inaccurate information will delay processing of your application. For “yes” or “no” responses, circle the correct answer. Social Security Numbers will not be released to the public. Applications must be signed by the applicant and contractor and must be notarized.

Full name: (First name, middle initial, last name)			Social security number:		
Street address:			Mailing address: (If not same as street address)		
City:			County:		
State:			Home phone number: ()		
Zip:			Work phone number: ()		
Date of birth (mm/dd/yy)	Height:	Weight:	Hair color:	Eye color	
Sex: Male Female	Ever convicted of a felony? Yes No	US citizen? Yes No	Resident of AR? Yes No		
Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 Degrees:					
If you obtained a GED circle 12.					
Number of years of experience in water well construction?					
Have you ever had an Arkansas Water Well Registration Certificate or License revoked? Yes No					
Employed by: (Name of business)			Contractor number:		
Business street address:			City:		
State:		County:		Zip:	

For PTF use only

Amount	Receipt #	Issue Date	Reg. #
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If you hold any water well driller or pump installer registration certificates from other states, please list other states and applicable registration information. Also, list any professional licenses or credentials you hold (i.e. Professional Geologist, Master Plumber, Electrician, etc.)

Please check the appropriate category or categories for which you are seeking certification and would like to be tested.

	Consolidated (Includes water well construction techniques for all water wells, other than monitoring wells, constructed in rock formation or in formations which will not cave, including the overburden and soils overlying consolidated formations)
	Unconsolidated (Includes water well construction techniques for all water wells, other than monitoring wells, constructed in sand, clay and gravel formations which are caving in nature)
	Hydrofracturing (includes pumping or injecting fluids, does not include the use of explosives)
	Monitoring and Piezometer (includes water well construction for the purpose of locating and sampling for engineering or geological data or sampling ground water)
	Geothermal (Includes construction of wells built for the purpose of geothermal energy exchange including earth-coupled and direct exchange systems.
	Pump installer (includes all types of pump applications, repairs, and installations)

Apprenticeship Relationship and Responsibility Statement

I will be in the employment and under the supervision of: _____
(Contractor name)

I will be under the personal supervision of: _____
(Driller or Pump installer name)

I hereby certify that the information remitted on this application and provided by me is true and correct; and that I have knowledge of the Arkansas Water Well Construction Act and regulations pertaining to water well construction.

Signed: _____
(Apprenticeship applicant)

I _____, a licensed Arkansas Water Well Contractor, affirm that
(Contractor name)
the above mentioned Supervising Driller or Pump installer and apprenticeship applicant are employed by me, the Supervisor is registered in the areas sought by the apprentice applicant, and the supervisor has held his registration for at least five of the previous ten years. I acknowledge and accept full responsibility for this apprenticeship.

Signed: _____
(Contractor name and number)

ACKNOWLEDGMENT

STATE OF _____)
) ss
COUNTY OF _____)

Before me on the ____ day of _____, _____, appeared _____ and swore before me the "Apprenticeship Relationship and Responsibility Statement" for all intents and purposes therein contained.

NOTARY PUBLIC

MY COMMISSION EXPIRES

(S E A L)

CRIMINAL HISTORY BACKGROUND CHECKS WITH ARKANSAS STATE POLICE

Applying for a license or registration for a **new** (anyone who is **not** currently licensed) Driller, Pump Installer, or Apprentice with the Arkansas Natural Resources Division (NRD) requires a criminal history background check from the Arkansas State Police (ASP). All license signing authorities are *required to* submit a criminal history background check.

Attached with this application is the consent form for the background check. Please fill in the form (please print), then sign, date, and have it notarized. It **MUST** be signed by you, the applicant, and notarized. Return it with this application. The information will be released to the Arkansas Natural Resources Division as listed on the bottom of this form.

Note: The entire criminal history background check process can take up to two weeks before NRD staff receives final results.



ARKANSAS STATE POLICE

ASP-122
(Eff. 08/11/2021)

Identification Bureau Individual Record Check Request Form

Please mark the box if this background check is for U.S. VISA purposes only and requires an Apostille Letter ☐

Full Name: _____
Last name First name Middle name Jr/Sr/III
Daytime Phone #: (____) _____

List ALL other names ever used (married, maiden, shortened, etc)

Date of Birth: _____ State of Birth: _____ Race: _____ Sex: _____
(Month/Day/Year)

Social Security #: _____ Driver's License #: _____
State

Physical Address: _____
Street

City State ZIP

Mailing Address: _____
Street or P.O. Box

City State ZIP

APPLICANT RECORD NOTIFICATION

Change, Correction, or Updating: Procedures for obtaining a change, correction, or updating of an FBI criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34 and/or Arkansas Code § 12-12-1013.

I give my consent for the Arkansas State Police to conduct a criminal record search on myself and release any results to the following person or entity:

Signature: _____ Date: _____
(First/MI/Last Name) Month/Day/Year

Release to: _____
Arkansas Water Well Construction Commission
(First/MI/Last Name) or Full Name of Agency

Mailing Address: _____
Cone Building 1, 10421 West Markham

Little Rock Street
AR 72205
City State ZIP

Daytime Phone #: (501) 682-3900

☐ 82005 State Record Check