

WATER WELL R  ☐ Original Record ☐		<b>** ** C-3</b>	0700	L		on of Water			Well ID	
1 LOCATION OF W	<u> </u>	ge in Well Use Fraction				ces App. No on Number		hin Numb		nga Numbar
County:	1/4 1/4	1/4	secuc	on Number	Towns	hip Numb S	R R	nge Number □ E □ W		
2 WELL OWNER: La		1/4		Duro1	L Addross v					
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:										
Address:										
Address:										
City:	State:	ZIP:								
3 LOCATE WELL	4 DEPTH OF COM	PLETED WEI	LL:		ft	5 Latitud	de.			(decimal degrees)
WITH "X" IN	Depth(s) Groundwater Encountered: 1)				. 10.	t. 5 Latitude:				
SECTION BOX:	2) ft. 3		Dry Well Datum: \( \text{WGS 84} \) \( \text{NAD 83} \) \( \text{NAD 27} \)							
11	WELL'S STATIC WA	ft.	ft. Source for Latitude/Longitude:					(IID 2)		
	☐ below land surface,			GPS (unit make/model:)						
NW NE - X	above land surface,		☐ Land Survey ☐ Topographic Map					No)		
	Pump test data: Well w									
W E	after hours Well w			☐ Online Mapper:						
SW   SE	after hours		ŀ							
	Estimated Yield:	P		6 Elevation:ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter: in. to				and Source: Land Survey GPS Topographic					
mile										
7 WELL WATER TO BE USED AS:										
1. Domestic:		iter Supply: well l								
Household	6. Dewaterin									
☐ Lawn & Garden ☐ Livestock	7. Aquifer Re									
2. Irrigation	8. Monitoring			12. Geothermal: how many bores?						
3. ☐ Feedlot	9. Environmental Remediation: well ID  ☐ Air Sparge ☐ Soil Vapor Extr				••	b) Open Loop  Surface Discharge  Inj. of Water				
4. ☐ Industrial	☐ Recovery		_							
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:										
Water well disinfected? $\square$ Yes $\square$ No										
8 TYPE OF CASING USED:  Steel PVC Other										
Casing diameter										
Casing height above land surface										
TYPE OF SCREEN OR PERFORATION MATERIAL:										
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)										
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)										
SCREEN OR PERFORATION OPENINGS ARE:										
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)										
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)										
SCREEN-PERFORATED INTERVALS: From										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Nearest source of possible		10., 1 10111		10		. 10., 1 10111 .	1		1	
☐ Septic Tank	☐ Lateral Line	es 🔲 Pit Pr	ivy		☐ Li	vestock Pen	S	☐ Insecti	cide Storage	3
☐ Sewer Lines	☐ Cess Pool	☐ Sewa				iel Storage		Aband	oned Water	Well
☐ Watertight Sewer Lin					☐ Fe	ertilizer Stor	age	☐ Oil We	ell/Gas Wel	ı
☐ Other (Specify)										
			om we							IC INTERNAL C
10 FROM TO	LITHOLOG	JIC LUG		FROM		TO 1	LITHO. LO	J (CORL.) O	PLUGGIN	IG INTERVALS
				Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged										
under my jurisdiction and was completed on (mo-day-year)										
Kansas Water Well Con	tractor's License No	Thi	is Wat	er Well R	Recor	d was com	pleted on (	mo-day-y	ear)	
under the business name of										
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.  KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.										