

Original Pagerd		ge in Well Use				on of Wate			Well ID			
						ces App. N		T 1. ' . N 1		NT1		
1 LOCATION OF WA	AIER WELL:	Fraction 1/4 1/4	1/4		Section	on Numbe	r	Township Numbe T S	r   Kan   R	ige Number □E □W		
2 WELL OWNER: La	First:			Rural	L Δddress v	whe						
Business:	st maine.	riist.						Address where well is located (if unknown, distance and arest town or intersection): If at owner's address, check here:				
Address:				direction in	JIII IICa	nest town of	mici	section). If at owner	, address,	sneck nere.		
Address:												
City:	State:	ZIP:			-							
3 LOCATE WELL						ft. 5 Latitude:(decimal degrees)						
WITH "X" IN	WITH "X" IN  Denth(s) Groundwater Encountered: 1)											
SECTION BOX:  N  2)												
	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
	below land surface, measured on (mo-day-yr					Grade mane, modern						
NW   NE	NE above land surface, measured on (mo-day-yr				(William Samusisean Lange Lange)							
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map							
WX E	after hours pumping gp Well water was ft.					Online Mapper:						
SW SE			gpm									
	Estimated Yield:						6 Elevation:ft. ☐ Ground Level ☐ TOC					
S	in. to ft. and				Source: ☐ Land Survey ☐ GPS ☐ Topographic Map							
mile												
7 WELL WATER TO BE USED AS:												
1. Domestic:	<ol><li>Public Wa</li></ol>					10. 🔲 Oil	l Fie	ld Water Supply: lea	se			
☐ Household	6. ☐ Dewatering: how many wells?					11. Test Hole: well ID						
Lawn & Garden	<b>—</b> 1 &											
Livestock	8. Monitoring: well ID					12. Geothermal: how many bores?						
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID  ☐ Air Sparge ☐ Soil Vapor Ext				•••	a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water						
4. Industrial		zxtraction	13. Other (specify):									
4. ☐ Industrial ☐ Recovery ☐ Injection 13. ☐ Other (specify):												
Water well disinfected? $\square$ Yes $\square$ No												
8 TYPE OF CASING USED:												
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)												
	☐ Key Punched ☐ W					ne (Open H						
SCREEN-PERFORATED INTERVALS: From												
9 GROUT MATERIA												
Grout Intervals: From  Nearest source of possible		It., From		ft. to	• • • • • •	. It., From	• • • • • •	It. to	It.			
Septic Tank	Lateral Line	es 🔲 Pit 1	Privv		ПТі	vestock Per	ns	☐ Insectici	de Storage			
Sewer Lines	☐ Cess Pool	Sew ☐ Sew				iel Storage		☐ Abandor				
☐ Watertight Sewer Line						ertilizer Sto						
Other (Specify)												
Direction from well?			from we									
10 FROM TO	LITHOLOG	GIC LOG		FROM	[	TO	LIT	HO. LOG (cont.) or l	LUGGIN	G INTERVALS		
				NI-4								
Notes:												
				-								
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged												
under my jurisdiction an												
Kansas Water Well Cont	ractor's License No	T	his Wa	ter Well I	Recor	d was con	nple	ted on (mo-day-ve	ar)	50 0110 001101.		
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 ar	d Environment, Bureau of V	Vater, Geology Se	ction, 10	00 SW Jack	son St.	., Suite 420,	Tope	ka, Kansas 66612-1367	. Telephone	785-296-3565.		