

WATER WELL R ☐ Original Record ☐		77 77 C-3	2002	1		on of Water			Well ID		
	<u> </u>	e in Well Use Fraction				rces App. No		venskin Nemk		n an Mumban	
1 LOCATION OF WATER WELL: County:		1/4 1/4 1/4		1/4	Section Number		10	wnship Numb T S		Range Number R □ E □ W	
2 WELL OWNER: La				Dural	Il Address where well is located (if unknown, distance and						
Address:	direction from nearest to via of intersection). If we owner is weaters, energy intersection										
Address:											
City:	State:	ZIP:				Т					
3 LOCATE WELL	4 DEPTH OF COM	IPLETED WE	LL:		ft	5 Latitu	de.			(decimal degrees)	
WITH "X" IN	Depth(s) Groundwater Encountered: 1)				. ft. 5 Latitude:						
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 I										
11	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	☐ below land surface, measured on (mo-day-yr) ☐ above land surface, measured on (mo-day-yr)					☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)					
NW NE											
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map						
W E	after hours pumping gp Well water was ft.					☐ Online Mapper:					
SW SE X	after hours pumpinggp										
	Estimated Yield:					6 Elevation:ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter:		. ft. and	t. and Source: Land Survey GP							
mile	•••	ft.	☐ Other								
7 WELL WATER TO BE USED AS:											
1. Domestic:		ter Supply: well				10. 🔲 Oil	Field W	Vater Supply: 16	ease		
Household	6. Dewatering: how many wells?										
Lawn & Garden	7. Aquifer Recharge: well ID							Uncased			
Livestock	8. Monitoring: well ID					12. Geothermal: how many bores?					
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Extra ☐ Soil Vapor ☐ Soil ☐ Soil Vapor ☐ Soil ☐				•••	a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial	☐ Recovery		-	Attaction							
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:											
Water Well disinfected? ☐ Yes ☐ NO 8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other											
Casing diameter											
Casing diameter											
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											
9 GROUT MATERIA											
Grout Intervals: From Nearest source of possible		It., From	I	τ. το		π., From .		It. to	II.		
Septic Tank	□ Lateral Line	s 🔲 Pit Pi	rivv		ПТі	vestock Pen	S	□ Insectio	cide Storage	2	
Sewer Lines	☐ Cess Pool	☐ Sewa				uel Storage	.5		oned Water		
☐ Watertight Sewer Lin						ertilizer Stor	age		ll/Gas Well		
Other (Specify)											
Direction from well?			om we								
10 FROM TO	LITHOLOG	GIC LOG		FROM	1	TO 1	LITHO.	LOG (cont.) or	PLUGGIN	IG INTERVALS	
					_						
					_						
					_						
					-						
				Nadage							
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	Kansas Water Well Contractor's License No										
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.											
KS Department of Health ar	nd Environment, Bureau of W	vater, Geology Sect	10n, 100	U SW Jack	son St.	., Suite 420, T	opeka, k	Sansas 66612-136	/. Telephon	e /85-296-3565.	