

| WATER WELL RE | | VV VV C-3 | 12324 | | ion of Water | | W 11 ID | | |
|--|--|-------------------|--|--|--|------------------------|--------------|-------------|--|
| | | e in Well Use | | | rces App. No. | E 1: N 1 | Well ID | N. 1 | |
| 1 LOCATION OF WA | Fraction | 1/ 1/ | Secti | on Number | Township Numb | | ge Number | | |
| County: | 1/4 1/4 | 1/4 1/4 | D | 1 4 1 1 1 | T S | R | □E □W | | |
| 2 WELL OWNER: Last Business: | : Name: | First: | Street or Rural Address where well is located (if unknown, distance an | | | | | | |
| Address: | direction from nearest town or intersection): If at owner's address, check here: | | | | | | | :neck nere: | |
| Address: | | | | | | | | | |
| City: | State: | ZIP: | | | | | | | |
| 3 LOCATE WELL | | ft | 5 Latitud | ٠. | | (daaimal daamaa) | | | |
| WITH "X" IN | | | | | | | | | |
| SECTION BOX: Depth(s) Groundwater Encountered: 1) | | | | | | | | | |
| WELL'S STATIC WATER LEVEL: | | | | | | | | | |
| ☐ below land surface, measured on (mo-day-yr | | | | ······ GPS (unit make/model:) | | | | | |
| above land surface, measured on (mo-day | | | |) (WAAS enabled? \(\subseteq \text{ Yes} \subseteq \text{No} \) | | | | | |
| | Pump test data: Well water was ft | | | | ☐ Land Survey ☐ Topographic Map | | | | |
| W E | after hours | | | Online Mapper: | | | | | |
| SW SE | Well w | | | | | | | | |
| | after hours pumping gp Estimated Yield:gpm | | | 6 Elevation:ft. ☐ Ground Level ☐ TOC | | | | | |
| | Bore Hole Diameter: in. to fi | | | | | | | | |
| mile | | | Other | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | |
| 1. Domestic: 5. Public Water Supply: well ID | | | | | | | | | |
| ☐ Household | 6. ☐ Dewaterin | | | | | | | | |
| ☐ Lawn & Garden | 7. 🗌 Aquifer Re | | | | | | | | |
| ☐ Livestock | 8. Monitoring | | | | nal: how many bore | | | | |
| 2. Irrigation | 9. Environmenta | | | | | | | | |
| 3. ☐ Feedlot | | | | | b) Open Loop ☐ Surface Discharge ☐ Inj. of Water | | | | |
| | 4. ☐ Industrial ☐ Recovery ☐ Injection 13. ☐ Other (specify): | | | | | | | | |
| 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 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 ft. to ft., From ft., From ft., From ft. | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | |
| Nearest source of possible contamination: | | | | | | | | | |
| ☐ Septic Tank | ☐ Lateral Line | | | | ivestock Pens | | cide Storage | | |
| ☐ Sewer Lines | Cess Pool | Sewage | | | uel Storage | | oned Water V | Well | |
| □ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Oil Well/Gas Well | | | | | | | | | |
| Direction from well? | | Distance from | | | | ft | | | |
| 10 FROM TO | LITHOLOG | | FRO | | | THO. LOG (cont.) o | | GINTERVALS | |
| 10 11011 | LITHOLOG | SIC EOG | TRO | 141 | TO EI | THO: LOG (cont.) o | I Le Gon v | SHVILKVILS | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | Notes: | | | | | <u> </u> | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 11 CONTRACTOR'S (| OR LANDOWNER'S | S CERTIFICATI | ON: This | water v | well was 🗌 o | constructed, rec | onstructed, | or plugged | |
| under my jurisdiction and was completed on (mo-day-year) | | | | | | | | | |
| Kansas Water Well Contr | actor's License No | This | Water Wel | I Keco | rd was comp | leted on (mo-day-y | ear) | ••••• | |
| under the business name (| end one copy to WATER W | FILOWNER and rate | ain one for vo | ur record | ds Fee of \$5.00 | for each constructed w | e11 | | |
| under the business name of | | | | | | | | | |

KSA 82a-1212 Visit us at http://www.kdheks.gov/waterwell/index.html