

WATER WELL R. ☐ Original Record ☐		VV VV C-3	202	_		ion of Water		╛,	Well ID			
1 LOCATION OF W	<u> </u>	e in Well Use Fraction				rces App. No				ga Numbar		
County:	AIEK WELL:	1/4 1/4	1/4	1/4	secu	on Number	Township N T	S	R	ge Number □ E □ W		
2 WELL OWNER: La				Duro	al Address where well is located (if unknown, distance and							
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:				1						
3 LOCATE WELL	4 DEPTH OF COM	PLETED WE	LL:		ft	5 Latitud	de.			(decimal degrees)		
WITH "X" IN	Depth(s) Groundwater Encountered: 1)					ft. 5 Latitude:						
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 1				Bongica de la comunicación de la							
11	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
	below land surface, measured on (mo-day-yr					GPS (unit make/model:						
★ NW NE	above land surface, measured on (mo-day-yr)				☐ Land Survey ☐ Topographic Map					lo)		
	Pump test data: Well water was ft.											
W E	after hours pumping gp Well water was ft.					☐ Online Mapper:						
SW SE	after hours pumping gp											
	Estimated Yield:gpm					6 Elevation:ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter: in. to				and Source: Land Survey GPS Topographi							
mile		in. to ft.										
7 WELL WATER TO BE USED AS:												
1. Domestic:		ter Supply: well				10. 🔲 Oil	Field Water Suppl	y: lease	:			
Household	6. Dewatering: how many wells?											
Lawn & Garden	7. Aquifer Recharge: well ID						ed Uncased					
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	☐ Recovery		_	Attaction								
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
Water well distributed? Yes No No S 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:												
							☐ Other (Specify					
	☐ Key Punched ☐ W					ne (Open Ho						
SCREEN-PERFORATED INTERVALS: From												
9 GROUT MATERIA												
Grout Intervals: From Nearest source of possible		π., From	I	τ. το		π., From .	It. to	• • • • • • • • • • • • • • • • • • • •	п.			
Septic Tank	□ Lateral Line	es 🔲 Pit Pr	ivv		ПТ	ivestock Pen	s 🗆 In	ecticide	e Storage			
Sewer Lines	☐ Cess Pool	☐ Sewa		oon		uel Storage			d Water V			
☐ Watertight Sewer Lin						ertilizer Stor			Gas Well	.,		
Other (Specify)												
Direction from well?			om we									
10 FROM TO	LITHOLOG	GIC LOG		FROM	1	TO I	LITHO. LOG (con) or PI	LUGGIN	G INTERVALS		
				NI-4								
Notes:												
11 CONTRACTOR'S	OR I ANDOWNED'	CEPTIFICA'	TION	· This w	ator :	well was	constructed □	recons	tructed	or nlugged		
under my jurisdiction an	d was completed on (r	o-dav-vear)	11011	• 11115 W	ater v	wen was is record is	true to the best	of my k	nowleda	or prugged ge and helief		
Kansas Water Well Con	tractor's License No	Th	is Wa	ter Well	Reco	rd was com	pleted on (mo-da	.y-vear)			
under the business name	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	JU SW Jack	son St	., Suite 420, T	opeka, Kansas 6661	-1367.	relephone	/85-296-3565.		