

WATER WELL R ☐ Original Record ☐		VV VV C-3	1070	1		ion of Water	1		Well ID		
	<u> </u>	ge in Well Use Fraction				rces App. No		ain Numb		aga Numbar	
1 LOCATION OF WATER WELL: County:		1/4 1/4 1/4		1/4	Section Number			Township Number		r Range Number R □ E □ W	
2 WELL OWNER: La	First:			Durol	Il Address where well is located (if unknown, distance and						
Business:											
Business: direction from nearest town or intersection): If at owner's address, check here:											
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)				. 10.	ft. 5 Latitude:					
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 I				Dry Well Datum: \(\Pi \) WGS 84 \(\Pi \) NAD 83 \(\Pi \) NAD 27						
	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
X	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					√o)	
	Pump test data: Well water wasft. after hours pumpinggp										
W E				☐ Online Mapper:							
SW SE	Well water was ft. after hours pumping gp										
	Estimated Yield:		Or			6 Elevation:ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter: in. to				and Source: Land Survey GPS Topograph						
mile		ft.		☐ Other							
7 WELL WATER TO BE USED AS:											
1. Domestic:		iter Supply: well									
Household	6. ☐ Dewatering: how many wells? 7. ☐ Aquifer Recharge: well ID										
☐ Lawn & Garden ☐ Livestock											
2. Irrigation	8. Monitoring: well ID						ermal: how i				
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											
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 in. to											
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)											
								From	ft to	ft.	
SCREEN-PERFORATED INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Nearest source of possible		,				,					
☐ Septic Tank	□ Lateral Line				☐ Li	ivestock Pen			cide Storage		
☐ Sewer Lines	Cess Pool	☐ Sewa				uel Storage			oned Water		
☐ Watertight Sewer Lin					☐ Fe	ertilizer Stor	age	☐ Oil We	ell/Gas Well		
☐ Other (Specify)											
10 FROM TO	LITHOLOG		om we	FROM						IG INTERVALS	
TO TROM TO	LITHOLOG	SIC LOG		TROW		10 1	LITIO. LOC	J (COIII.) O	LUGGIN	UINTERVALS	
				Notes:							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \square constructed, \square reconstructed, or \square plugged											
under my jurisdiction and was completed on (mo-day-year)											
Kansas Water Well Con	tractor's License No	Th	is Wat	er Well I	Recor	rd 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.											