

| WATER WELL R ☐ Original Record ☐ | | VV VV C-3 | 200. | | | on of Water | | | Well ID | | | |
|--|---|--|--------|----------------|---|---|---------------------|------------------|-----------------------|-------------------|--|--|
| 1 LOCATION OF W | <u> </u> | ge in Well Use Fraction | | | | rces App. No | | vvm chin Numb | | n an Mumban | | |
| County: | 1/4 1/4 1/4 1/4 1/4 | | | Section Number | | 10 | Township Number T S | | nge Number □ E □ W | | | |
| 2 WELL OWNER: La | First: | | | Durol | l Addrage v | vhoro s | - ~ | (if unless our | | | | |
| Business: | | nral Address where well is located (if unknown, distance and nearest town or intersection): If at owner's address, check here: | | | | | | | | | | |
| Address: | | | | | | | | | | | | |
| Address: | | | | | | | | | | | | |
| City: | State: | ZIP: | | | | Т | | | | | | |
| 3 LOCATE WELL | 4 DEPTH OF COM | PLETED WE | LL: | | ft | 5 Latitu | de. | | | (decimal degrees) | | |
| WITH "X" IN | Depth(s) Groundwater Encountered: 1) | | | | . 10. | ft. 5 Latitude: | | | | | | |
| SECTION BOX: | 2) ft. 3) ft., or 4) 🗆 I | | | | Dongrade: | | | | | | | |
| 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 | | | | | | | | | | | | |
| | Pump test data: Well water wasft. | | | | ☐ Land Survey ☐ Topographic Map | | | | | | | |
| W E | after hours pumping gp. Well water was ft. | | | | | Online Mapper: | | | | | | |
| SW SE | after hours pumping gp | | | | | | | | | | | |
| | Estimated Yield: | | 5P | | 6 Elevation:ft. Ground Level TOC | | | | | | | |
| S | Bore Hole Diameter: in. to | | | | . and Source: Land Survey GPS Topograph | | | | | | | |
| mile | in. to ft. | | | | | | Other | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | | |
| 1. Domestic: | | iter Supply: well | | | | | | Water Supply: 16 | | | | |
| Household | 6. Dewatering: how many wells? | | | | | | | | | | | |
| ☐ Lawn & Garden ☐ Livestock | 7. Aquifer Recharge: well ID | | | | | | | | | | | |
| 2. Irrigation | 8. Monitoring: well ID | | | | | 12. Geothermal: how many bores? | | | | | | |
| 3. ☐ Feedlot | 9. Environmental Remediation: well ID Air Sparge Soil Vapor Extra | | | | ••• | a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water | | | | | | |
| 4. ☐ Industrial | ☐ Recovery | | _ | | | | | cify): | | | | |
| 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 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) | | | | | | | | | | | | |
| □ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) | | | | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | | | | |
| Nearest source of possible | | 10., 1 10111 | | | | 10, 1 10, 11 | | 10. 10 | | | | |
| ☐ Septic Tank | □ Lateral Line | es 🔲 Pit Pi | ivy | | ☐ Li | ivestock Pen | S | ☐ Insection | cide Storage | ; | | |
| ☐ Sewer Lines | ☐ Cess Pool | ☐ Sewa | | | | uel Storage | | | oned Water | | | |
| ☐ Watertight Sewer Lin | | | | | ☐ Fe | ertilizer Stor | age | ☐ Oil We | ll/Gas Well | | | |
| ☐ Other (Specify) Direction from well? ft. | | | | | | | | | | | | |
| 10 FROM TO | LITHOLOG | | om we | FROM | | | | | | IG INTERVALS | | |
| TO TROM TO | LITHOLOG | SIC LOG | | TROW | 1 | 10 | LITTIO | . LOG (cont.) of | LUGGIN | O INTERVALS | | |
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| | | | | Notes: | l | I | | | | | | |
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| | | | | 1 | | | | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \square constructed, \square reconstructed, or \square plugged | | | | | | | | | | | | |
| under my jurisdiction ar | d was completed on (m | no-day-year) | | a | nd th | is record is | true to | o the best of m | y knowled | ge and belief. | | |
| Kansas Water Well Con | tractor's License No | Th | ıs Wat | ter Well l | Kecoi | rd was com | pleted | on (mo-day-ye | 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. | | | | | | | | | | |

Visit us at http://www.kdheks.gov/waterwell/index.html

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