

WATER WELL R		** ** C-3	.2021		ion of Water		W 11 ID			
		ge in Well Use	1		rces App. No.		Well ID	N. 1		
1 LOCATION OF WA	Fraction	1/ 1/	Section	on Number	Township Numb		ge Number			
County:		1/4 1/4	D	1 4 1 1	T S	R	□E □W			
2 WELL OWNER: La Business:	st Name:	First:	· ·							
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 Lotitud	n•		(daaimal daamaaa)				
WITH "X" IN	Depth(s) Groundwater			t. 5 Latitude:						
SECTION BOX:	ECHON BOA: $\frac{1}{2}$ ft or $\frac{1}{2}$									
	WELL'S STATIC WATER LEVEL:									
	□ below land surface, measured on (mo-day-yr				GPS (unit make/model:)					
NW NE	above land surface, measured on (mo-day-yr) (WAAS enabled? ☐ Yes ☐ No)					
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map					
W E	after hours Well w			Online Mapper:						
SW X										
	after hours pumping gpr Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter:	ft. and	nd Source: Land Survey GPS Topographic Map							
mile				☐ Other						
7 WELL WATER TO BE USED AS:										
1. Domestic:	5. 🗌 Public Wa	ter Supply: well ID.			10. 🔲 Oil F	ield Water Supply: 1	ease			
☐ Household	6. Dewaterin									
Lawn & Garden	7. Aquifer R									
Livestock		g: well ID								
2. Irrigation	9. Environmenta									
3. ☐ Feedlot 4. ☐ Industrial	☐ Air Sparge ☐ Recovery	r Extraction	l	b) Open Loop						
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										
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										
Grout Intervals: From										
Nearest source of possible contamination: □ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide Storage										
Sewer Lines	☐ Cess Pool	☐ Sewage I	agoon		uel Storage		oned Water \			
☐ Watertight Sewer Lin										
Other (Specify)										
Direction from well?										
10 FROM TO	LITHOLOG	GIC LOG	FRO	M	TO L	THO. LOG (cont.) o	r PLUGGIN	G INTERVALS		
				-						
				-						
			Notes							
Notes:										
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIFICATIO	N: This v	vater v	well was □	constructed \square reco	onstructed	or nlugged		
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	tractor's License No	This V	Vater Well	Reco	rd was comp	leted on (mo-day-y	ear)			
under the business name	of									
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, Burgay of Water, Goology Section, 1000 SW Jackson St., Suita 420, Topaka, Kappas 66612, 1367, Talaphone 785, 296, 3565.										
ks Department of Health at	ia Environment, Bureau of V	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.								

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