

WATER WELL RE		W W C-3	000009		ion of Water		W 11 ID		
		e in Well Use			rces App. No.		Well ID	NY 1	
1 LOCATION OF WATER WELL:		Fraction	1/ 1/	Secti	on Number	Township Numb		ige Number	
County:	1/4 1/4	1/4 1/4		1 4 1 1 1	T S	R	□E □W		
2 WELL OWNER: Last Business:	First:	· · · · · · · · · · · · · · · · · · ·							
Address:	direction from nearest town or intersection): If at owner's address, check here:							ineck nere:	
Address:									
City:	State:	ZIP:							
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:					5 I otitud	n•		(daaimal daamaa)	
WITH "A" IN									
SECTION BOX:	Depth(s) Groundwater Encountered: 1)								
N N	WELL'S STATIC WATER LEVEL:								
	measured on (mo-				(unit make/model:		)		
NW NE	measured on (mo-	neasured on (mo-day-yr)			(WAAS enabled? ☐ Yes ☐ No)				
	I unip test data. Well water was					☐ Land Survey ☐ Topographic Map			
W E	after hours			Online Mapper:					
SW   SE	Well w								
1 1 . 1 . 1 1	after hours pumping gpr Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC					
	Bore Hole Diameter: in. to f								
1 mile			Other						
7 WELL WATER TO BE USED AS:									
1. Domestic: 5. Public Water Supply: well ID									
☐ Household	6. Dewatering: how many wells?								
☐ Lawn & Garden	7. Aquifer Recharge: well ID								
☐ Livestock	8. Monitoring								
2. Irrigation	9. Environmental Remediation: well ID								
3. ☐ Feedlot					b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
4. 🗌 Industrial	Recovery	☐ Injection	1		13. <b>☐</b> Othe	r (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 in. to ft., Diameter ft., Diameter ft.									
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. to ft.									
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 Lagoon ☐ Fuel Storage ☐ Abandoned Water Well								
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well									
☐ Other (Specify)									
10 FROM TO	LITHOLOG		FRO			THO. LOG (cont.) o		CINTEDVALS	
10 1 KOW 10	LITHOLOG	ole Lou	TIX	)1V1	10 Li	THO. LOG (cont.) o	LUUUIIN	JINTERVALS	
No					Notes:				
11 CONTRACTOR'S O	R LANDOWNER'S	CERTIFICAT	ION: This	water	well was 🗌	constructed, 🗌 reco	onstructed,	or plugged	
under my jurisdiction and was completed on (mo-day-year)									
Kansas Water Well Contra	ctor's License No	This	Water We	I Reco	rd was comp	leted on (mo-day-y	ear)		
under the business name of	d one copy to WATER W	FILOWNER and ret	tain one for vo	ur recor	ds Fee of \$5.00	for each constructed w			
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.									

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