

WATER WELL RI				, , , ,		sion of Water			W-11 ID		
		e in Well				rces App. N		T 1. ' . NI 1.	Well ID		
1 LOCATION OF WA	Fraction 1/4 1/4 1/4 1/4			Section Number		r	Township Numb	l l	nge Number		
County:	1/4	1/4 1		- D	1 4 1 1		T S	R	□ E □ W		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from pearest town or intersection): If at owner's address, check here:											
Business: direction from nearest town or intersection): If at owner's address, check here:											
Address:											
City:	State:	ZIP:									
3 LOCATE WELL		fŧ	E I atitu	da.			(1 : 11 )				
WITH "X" IN											
SECTION BOX:	1 2) # 3) # 0 1 1										
N	WELL'S STATIC WATER LEVEL:				. ft. Source for Latitude/Longitude:						
	<ul><li>□ below land surface, measured on (mo-day-yr)</li><li>□ above land surface, measured on (mo-day-yr)</li></ul>						PS (u	nit make/model:		)	
NW   NE								VAAS enabled?		· ·	
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map					·	
W E	after hours pumpinggp					Online Mapper:					
SW SE	Well water was ft.										
	after hours pumping gp Estimated Yield:gpm				<b>6 Elevation</b> :ft. ☐ Ground Level ☐ TOC						
$\begin{bmatrix} & & & & & & & & & & & & & & & & & & &$	Bore Hole Diameter: in. to ft.										
1 mile				Other							
1 mile  in. to ft. Uniter											
1. Domestic: 5. Public Water Supply: well ID											
☐ Household	6. ☐ Dewatering: how many wells?										
☐ Lawn & Garden											
☐ Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?						
2.  Irrigation	9. Environmental Remediation: well ID										
3.  Feedlot					1	b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial ☐ Recovery ☐ Injection 13. ☐ Other (specify):											
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:											
Water well disinfected?											
8 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:											
SCREEN OR PERFORATION OPENINGS ARE:   Continuous Slot											
☐ Continuous Stot ☐ Mill Stot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)											
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 Line		☐ Pit Privy			ivestock Per			cide Storag		
☐ Sewer Lines	Cess Pool		Sewage L			uel Storage		Abando			
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well											
☐ Other (Specify)											
10 FROM TO	LITHOLOG			FRO				HO. LOG (cont.) 01		IC INTEDVALS	
10 PROW TO	LITHOLOG	JIC LOG		TRO	IVI	10	LIII	IO. LOG (cont.) of	LUGGII	VO INTERVALS	
				Notes	<u> </u>	J					
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTI	FICATIO	N: This	water	well was	coı	nstructed, $\square$ reco	onstructed	, or plugged	
under my jurisdiction an	d was completed on (m	no-day-ye	ear)		and th	nis record is	s tru	e to the best of m	y knowled	dge and belief.	
Kansas Water Well Cont	tractor's License No		This W	ater Well	Reco	ord was com	nplet	ed on (mo-day-y	ear)		
under the business name	ord one copy to WATER W	EII OWN	ED and mate:	ono for v		de Eec ef ¢ f	00 f-	w anah annetwatad			
	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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.										

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