

WATER WELL R		III VV VV C-3		vision of Water ources App. No.			
		nange in Well Use				Well ID	
1 LOCATION OF WATER WELL: County:			Section Number Township Number T S		Township Number	Range Number R □ E □ W	
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and							
				rection from nearest town or intersection): If at owner's address, check here:			
Address:							
Address: City: State: ZIP:							
City:  3 LOCATE WELL	State:	ZIP:					
WITH "X" IN		OMPLETED WELL:		t. 5 Latitude	j	(decimal degrees)	
SECTION BOX:	Depth(s) Groundw			Longitude:(decimal degrees)			
N	2) ft. 3) ft., or 4) \( \subseteq \text{Discrete} \) WELL'S STATIC WATER LEVEL:				☐ WGS 84 ☐ NAD 8	33 NAD 27	
	below land sur			or Latitude/Longitude:	,		
NW NE	above land sur	v-vr)		☐ GPS (unit make/model:)  (WAAS enabled? ☐ Yes ☐ No)			
IVW  IVE	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map		
W E		after hours pumping gpm			Online Mapper:		
SW SE		Well water was ft.					
		after hours pumping gpm Estimated Yield:gpm			n:ft [	☐ Ground Level ☐ TOC	
S		ft and		Source:   Land Survey   GPS   Topographic Map			
mile	Bore Hole Diameter: in. to ft. and in. to ft.					_ 101 1	
7 WELL WATER TO BE USED AS:							
1. Domestic:	5. Public Water Supply: well ID			10. ☐ Oil F	10. ☐ Oil Field Water Supply: lease		
☐ Household				11. Test Hole: well ID			
Lawn & Garden				☐ Cased ☐ Uncased ☐ Geotechnical			
Livestock				12. Geothermal: how many bores?			
2. ☐ Irrigation 3. ☐ Feedlot		ID		a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water			
4. ☐ Industrial	☐ Air Sparge ☐ Soil Vapor Extraction ☐ Recovery ☐ Injection				13. Other (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							
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., From 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	□ Lateral Lines       □ Pit Privy       □ Livestock Pens       □ Insecticide Storage         □ Cess Pool       □ Sewage Lagoon       □ Fuel Storage       □ Abandoned Water Well					0	
☐ Watertight Sewer Lin							
☐ Other (Specify)					•		
Direction from well?							
10 FROM TO	LITHO	LOGIC LOG	FROM	TO LI	THO. LOG (cont.) or Pl	LUGGING INTERVALS	
			Notes:				
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)							
under my jurisdiction an	d was completed o	n (mo-day-year)	and	this record is to	rue to the best of my l	knowledge and belief.	
under the husiness name	uactor's License N	υ I nis V	vater well Re	coru was compl	ieteu on (mo-day-year	1)	
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.							

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