

WATER WELL REC		// // C-3	02920		ion of Water		W 11 ID			
		e in Well Use			rces App. No.		Well ID	NY 1		
1 LOCATION OF WAT	Fraction	1/ 1/	Secti	on Number	Township Numb		ige Number			
County:		1/4 1/4	D	1 4 1 1 1	T S	R	□E □W			
2 WELL OWNER: Last I Business:	Name:	First:	Street or Rural Address where well is located (if unknown, distance							
Address:	direction from nearest town or intersection): If at owner's address, check here:							ineck nere:		
Address:										
City:	State:	ZIP:								
3 LOCATE WELL	•	ft	5 I ofitud	0.		(daaimal daamaa)				
WITH "A" IN	4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)									
SECTION BOA:	SECTION BOX: ft or 4) \Box									
N										
X □ below land surface, measured on (mo-day-ye				····· GPS (unit make/model:)						
above land surface, measured on (mo-da)(WAAS enabled? \(\subseteq \text{ Yes} \subseteq \text{No} \)						
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map					
W E	after hours			Online Mapper:						
SW SE	Well w									
1 1 . 1 . 1 1	after hours pumping gp Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC						
	Bore Hole Diameter: in. to f									
1 mile	in. to ft				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					d Uncased				
☐ Livestock	8. Monitoring				mal: how many bore					
2. Irrigation	9. Environmental Remediation: well ID									
. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ext				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? ☐ Yes ☐ No										
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other										
Casing diameter in. to ft., Diameter in. to 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 Line				ivestock Pens		cide 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) □ Oil Well/Gas Well										
Direction from well?		Distance from	 woll9			fe				
10 FROM TO	LITHOLOG		FRO			ITHO. LOG (cont.) o		GINTERVALS		
IV TROM	LITHOLOG	JIC EOG	TRO	141	10 E	THO: LOG (cont.) o	I I LC GGII V	SHVIERVILD		
	Not					otes:				
11 CONTRACTOR'S O	R LANDOWNER'S	S CERTIFICATION	N: This	water v	well was \square	constructed, 🗌 rec	onstructed,	or plugged		
under my jurisdiction and was completed on (mo-day-year)										
Kansas Water Well Contra	ctor's License No	This V	vater Well	Reco	rd was comp	leted on (mo-day-y	ear)			
under the business name of	d one copy to WATER W	ELLOWNER and retai	n one for you	ir record	is Fee of \$5 M) 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.										

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