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| <b>2 WATER WELL OWNER:</b><br>RR#, St. Address, Box #:<br>City, State ZIP Code: | <input type="checkbox"/> GPS unit (Make/Model: _____)  |
|   | <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey<br><u>Est. Accuracy:</u> <input type="checkbox"/> < 3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m |

**5 TYPE OF BLANK CASING USED:**

☐ Steel      ☐ RMP (SR)      ☐ Wrought      ☐ Fiberglass      ☐ Other (Specify below)  
☐ PVC      ☐ ABS      ☐ Asbestos-Cement      ☐ Concrete Tile      \_\_\_\_\_

Blank casing diameter \_\_\_\_\_ in.      Was casing pulled? Yes ☐ No ☐      If yes, how much \_\_\_\_\_

Casing height above or below land surface \_\_\_\_\_ in.

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) \_\_\_\_\_ and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. \_\_\_\_\_. This Water Well Record was completed on (mo/day/year) \_\_\_\_\_ under the business name of \_\_\_\_\_ by (signature) \_\_\_\_\_

Revised 1/29/2014