

WATER WELL R ☐ Original Record ☐		vv vv C-3	0002	- 1		on of Water			Well ID			
1 LOCATION OF W	<u> </u>	ge in Well Use Fraction				ces App. No		ownshin Numb		nga Numbar		
County:	1/4 1/4 1/4 1/4			Section Number		1	'ownship Numb T S		Range Number R □ E □ W			
2 WELL OWNER: La	First:			Duro1	al Address where well is located (if unknown, distance and							
Business:		nearest town or intersection): If at owner's address, check here:										
Address:												
Address:												
City:	State:	ZIP:			ı	1						
3 LOCATE WELL	4 DEPTH OF COM	PLETED WEI	L:		ft	5 Latitu	de.			(decimal degrees)		
WITH "X" IN	Depth(s) Groundwater I		. ft. 5 Latitude:									
SECTION BOX:	2) ft. 3		Dry Well Datum: \(\text{VWGS 84} \) \(\text{NAD 83} \) \(\text{NAD 27}\)									
11	WELL'S STATIC WA	ft.	ft. Source for Latitude/Longitude:									
	below land surface, measured on (mo-day-yr					GPS (unit make/model:)						
NW NE	above land surface,		••••	(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map ☐ Online Mapper:								
	Pump test data: Well wafterhours											
W E												
SW SE	Well water was ft. after hours pumping gpi											
	Estimated Yield:	or		6 Elevation:ft. ☐ Ground Level ☐ TOC								
S	Bore Hole Diameter: in. to f				and Source: Land Survey GPS Topograp							
mile	1111 121 121								•••••			
7 WELL WATER TO BE USED AS:												
1. Domestic:		iter Supply: well I						Water Supply: 16				
Household	6. Dewaterin											
☐ Lawn & Garden ☐ Livestock	7. ☐ Aquifer Re 8. ☐ Monitoring											
2. Irrigation												
3. ☐ Feedlot	9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Ext				•••	a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water						
4. ☐ Industrial	☐ Recovery					ecify):						
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
Water well disinfected? \square Yes \square 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)												
								ft From	ft to	n ft		
SCREEN-PERFORATED INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From												
Nearest source of possible		,				,						
☐ Septic Tank	☐ Lateral Line					vestock Pen	ıS		cide Storag			
☐ Sewer Lines	Cess Pool	☐ Sewag				iel Storage			oned Water			
☐ Watertight Sewer Lin					∐ Fe	ertilizer Stor	age	∐ Oil We	ll/Gas Wel	İ		
☐ Other (Specify)												
10 FROM TO	LITHOLOG		om we	FROM						NG INTERVALS		
TO TROM TO	LITHOLOG	SIC LOG		TROM		10		J. LOG (cont.) of	LUGGII	IO INTERVALS		
				Notes:	<u>l</u>							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \square constructed, \square reconstructed, or \square plugged												
under my jurisdiction ar	id was completed on (m	no-day-year)		aı	nd thi	is record is	true	to the best of m	y knowled	lge and belief.		
Kansas Water Well Con	tractor's License No	Thi	s Wat	er Well b	Recor	d was com	plete	d on (mo-day-y	ear)			
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.										