

WATER WELL RI		** ** C-3			ion of Water			W 11 ID		
<u> </u>		ge in Well Use			rces App. N			Well ID		
1 LOCATION OF WATER WELL:		Fraction		Section	on Number	r T	Township Numb		nge Number	
County:			/ ₄ 1/ ₄				T S	R	$\square E \square W$	
2 WELL OWNER: La	st Name:	First:				s where well is located (if unknown, distance and or intersection): If at owner's address, check here:				
Business: Address:			direction fr	om nea	arest town or	interse	ction): If at owner	's address,	check here: 🔲	
Address:										
City:	State:	ZIP:								
3 LOCATE WELL										
WITH "X" IN	4 DEPTH OF COM			ft.						
SECTION BOX:	SECTION BOX: Depth(s) Groundwater Encountered: 1)				201810000)					
N	2) ft. 3) ft., or 4) \(\sqrt{N} \) WELL'S STATIC WATER LEVEL:									
	below land surface, measured on (mo-day-yr)				Source for Latitude/Longitude:					
					— ••• • (••••• •••• ••• ••• ••• ••• •••					
NW NE	Pump test data: Well w		(**************************************					10)		
W E	after hours			☐ Land Survey ☐ Topographic Map ☐ Online Mapper:						
	Well v			Online wapper.						
SW SE	after hours	gpm								
X	Estimated Yield:			6 Elevation:ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter:	ft. and		Source: Land Survey GPS Topographic Map						
mile	· L									
7 WELL WATER TO BE USED AS:										
1. Domestic:		ater Supply: well ID					Water Supply: le			
Household										
<u> </u>	☐ Lawn & Garden 7. ☐ Aquifer Recharge: w						☐ Uncased ☐ C			
Livestock	8. Monitorin			12. Geothermal: how many bores?						
2. Irrigation		al Remediation: well l		••••			oop			
3. Feedlot	☐ Air Sparge		Extraction				op Surface Dis			
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 in. Weight lbs./ft. Wall thickness or gauge No.										
TYPE OF SCREEN OR PERFORATION MATERIAL:										
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify) ☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)										
☐ 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										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From										
Nearest source of possible		,			,					
☐ Septic Tank	☐ Lateral Line	es 🔲 Pit Privy		☐ Li	ivestock Per	ıs	☐ Insection	cide Storage		
☐ Sewer Lines	☐ Cess Pool	☐ Sewage L			uel Storage		☐ Abando	oned Water	Well	
☐ Watertight Sewer Line				□ Fe	ertilizer Stor	rage	☐ Oil We	ll/Gas Well		
☐ Other (Specify)										
									G DIEDLIAL G	
10 FROM TO	LITHOLOG	GIC LOG	FRON	1	TO	LITH	O. LOG (cont.) or	PLUGGIN	G INTERVALS	
			Notes:							
1100.5										
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIFICATIO	N: This w	ater v	well was	Cons	structed 🗆 reco	nstructed	or nlugged	
under my jurisdiction an	d was completed on (n	no-day-vear)	11113 W	and th	is record is	s true	to the best of m	v knowled	ge and belief.	
under my jurisdiction an Kansas Water Well Cont	tractor's License No	This W	ater Well	Reco	rd was con	plete	d on (mo-day-ve	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.										
KS Department of Health ar	ia Environment, Bureau of V	water, Geology Section, 1	UUU SW Jack	cson St	., Suite 420, '	ropeka	, Kansas 66612-136	/. Telephone	: 785-296-3565.	

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