

WATER WELL RI		VV VV C-3	103317		ion of Water		W 11 ID		
		e in Well Use			rces App. No.	T 1: N 1	Well ID	NY 1	
1 LOCATION OF WA	Fraction	1/ 1/	Secti	on Number	Township Numb		ige Number		
County:	1/4 1/4	1/4 1/4	. D	1 4 1 1 1	T S	R	□E □W		
2 WELL OWNER: La Business:	First:	· · · · · · · · · · · · · · · · · · ·							
Address:	direction from nearest town or intersection): If at owner's address, check here:							ineck nere:	
Address:									
City:	State:	ZIP:							
3 LOCATE WELL	L <b>:</b>	ft	5 Lotitud	··		(daaimal daamaa)			
WITH "X" IN	Depth(s) Groundwater								
SECTION BOA: $\begin{array}{c} 1 \\ 2 \\ \end{array}$ ft or $\begin{array}{c} 4 \\ \end{array}$									
	□ below land surface, measured on (mo-day-yr				······· GPS (unit make/model:)				
above land surface, measured on (mo-day-yr				) (WAAS enabled? ☐ Yes ☐ No)					
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map				
W E	after hours			Online Mapper:					
★ SW   SE	Well w								
^	after hours pumping gp Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter: in. to f								
1 mile			Other						
7 WELL WATER TO BE USED AS:									
1. Domestic: 5. Public Water Supply: well ID									
☐ Household	6. ☐ Dewatering: how many wells?								
☐ Lawn & Garden									
☐ Livestock	8. Monitorin			12. Geothermal: how many bores?					
2.  Irrigation	9. Environmental Remediation: well ID								
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ext				n	b) Open Loop ☐ Surface Discharge ☐ Inj. of Water  13. ☐ Other (specify):				
4. Industrial	☐ Recovery								
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									
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 Line				ivestock Pens		cide Storage		
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well									
☐ Watertight Sewer Line ☐ Other (Specify)				⊔г	ertilizer Storag	ge □ Oil We	ell/Gas Well		
Direction from well?		Distance from	n well?			ft			
10 FROM TO	LITHOLOG		FRO			THO. LOG (cont.) o		GINTERVALS	
10 110.11	EITHOLOG	310 200	TRO	111	10 21	THO. EOG (Conc.) O	I I Le don v	SHVIERVIES	
	s:	:							
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIFICAT	ON: This	water	well was 🔲 o	constructed, rec	onstructed,	or plugged	
under my jurisdiction and was completed on (mo-day-year)									
Kansas Water Well Cont	ractor's License No	This	water Wel	i Keco	rd was comp	ieted 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.									

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