

WATER WELL R ☐ Original Record ☐		VV VV C-3	0000	<u> </u>		on of Water	1		Well ID		
		ge in Well Use Fraction				rces App. No		ovenskin Namb		n an Mumban	
1 LOCATION OF WATER WELL: County:		1/4 1/4	1/4	Section Number		1	ownship Numb T S	R R	Range Number R □ E □ W		
2 WELL OWNER: La	First:	1/4		Durol	al Address where well is located (if unknown, distance and						
Business:			n nearest town or intersection): If at owner's address, check here:								
Address:	anced of from federal town of intersection). If at owner 5 address, check field.										
Address:											
City:	State:	ZIP:				Т					
3 LOCATE WELL	4 DEPTH OF COM	PLETED WE	LL:		ft	5 Latitu	de.			(decimal degrees)	
WITH "X" IN	Depth(s) Groundwater Encountered: 1)				. ft. 5 Latitude:						
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 I										
17	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:					(IID 27	
	below land surface, measured on (mo-day-yr					GPS (unit make/model:)					
X - NW NE	above land surface, measured on (mo-day-yr					(WAAS enabled? ☐ Yes ☐ No)					
	Pump test data: Well water wasft.				☐ Land Survey ☐ Topographic Map						
W E	after hours pumping gp. Well water was ft.					☐ Online Mapper:					
SW SE	after hours pumping gp					6 Elevation:ft. Ground Level TOC					
	Estimated Yield:	Gr									
S	Bore Hole Diameter: in. to				and Source: Land Survey GPS Topograph						
mile		. ft.		☐ Other							
7 WELL WATER TO BE USED AS:											
1. Domestic:		iter Supply: well						Water Supply: 16			
Household	6. Dewatering: how many wells?										
☐ Lawn & Garden ☐ Livestock	7. Aquifer Recharge: well ID										
2. Irrigation	8. Monitoring: well ID							how many bores			
3. ☐ Feedlot	9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Extr				•••	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? 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:											
								her (Specify)			
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)											
SCREEN-PERFORATED INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Nearest source of possible		It., Pioni	1	ι. ιΟ		11., 140111 .		11. 10	1		
Septic Tank	Lateral Line	es 🔲 Pit Pi	rivy		□Li	vestock Pen	ıS	☐ Insection	cide Storage	2	
Sewer Lines	Cess Pool	☐ Sewa				iel Storage			oned Water		
☐ Watertight Sewer Lin					☐ Fe	ertilizer Stor	age	☐ Oil We	ll/Gas Well		
☐ Other (Specify)											
			om we							IC DIFFERENCE C	
10 FROM TO	LITHOLOG	JIC LOG		FROM	L	TO	LITHC	D. LOG (cont.) 01	PLUGGIN	IG INTERVALS	
					_						
					-						
					-						
					-						
				Notes:							
110665											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged											
under my jurisdiction an	d was completed on (n	no-day-year)		a	nd th	is record is	true t	to the best of m	v knowled	ge and belief.	
Kansas Water Well Con	tractor's License No	Th	is Wat	er Well I	Recor	rd was com	pletec	l 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.											
220 2 Sparament of Health at	Dureau Of V	, Scology Sect		Juck	Jon 196.	.,	Jonu,		cicpiion		