

M	_		RECORD		W W C-3	0012		sion of Wate					
								sources App. No ection Number Township Num			Well ID		
I	LOCATION OF WATER WELL: County:				$\begin{array}{c c} \text{Fraction} & \text{Sec} \\ \hline 1/4 & 1/4 & 1/4 & 1/4 \end{array}$			1 0			$\Box E \Box W$		
2		OWNER:	I ast Name		First:				whe	here well is located (if unknown, distance and			
4	Business:		Last Name.		11150.		ion from nearest town or intersection): If at owner's address, check here:						
	Address:									,	,		
	Address: City:			State:	ZIP:								
3	LOCAT	E WELL											
J	WITH "				IPLETED WELL: ft. Encountered: 1) ft.			5 Latitude:					
	SECTIO			Bincountered: 1) 3) ft., or 4)									
	Ν	1			R LEVEL: ft.			Source for Latitude/Longitude:					
			🗌 below la	 □ below land surface, measured on (mo-day-yr) □ above land surface, measured on (mo-day-yr) Pump test data: Well water was ft. after hours pumping gpm Well water was ft. 					□ GPS (unit make/model:) (WAAS enabled? □ Yes □ No) □ Land Survey □ Topographic Map □ Online Mapper:				
	NW	NE											
			-										
W		E	anci										
	SW	SX	after	after hours pumping gpm									
			Estimated Y	stimated Yield:gpm				6 Elevation: ft. Ground Level TOO					
		S	Bore Hole D		in. to ft. and			Source: Land Survey GPS Topographic Map Other					
	7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID 10. □ Oil Field Water Supply: lease												
	House				g: how many wells? .		11. Test Hole: well ID						
	🗌 Lawn a		7. 🗖	Aquifer R	echarge: well ID		Cased Uncased Geotechnical						
	Livesto			g: well ID				al: how many bores					
	☐ Irrigati ☐ Feedlo			al Remediation: well ID				a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water					
	Industr			Air Sparge Recovery		13. Other (specify):							
	Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:												
			0	-			110	II yes, dat	c sui	ipie was sublinaed	u		
Water well disinfected? □ Yes □ No 8 TYPE OF CASING USED: □ Steel □ PVC □ Other CASING JOINTS: □ Glued □ Clamped □ Welded □ Threaded													
Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft.													
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No													
TYPE OF SCREEN OR PERFORATION MATERIAL:													
Steel 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)												
_								one (Open H					
SC					n ft. to								
0					n ft. to								
					Cement grout E								
			ole contaminatio					, 1 10111					
	🗌 Septic '			ateral Line				livestock Pe		☐ Insectic			
	Sewer l			Cess Pool	Sewage L			Fuel Storage		Abando		Well	
		ight Sewer L Specify)			Feedyard			Fertilizer Sto	orage	🗌 Oil Wel	II/Gas well		
					Distance from					ft.			
10	FROM	ТО	L	ITHOLO	GIC LOG	FRO	М	TO	LIT	HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
						Notes	5:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or 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													
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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.													
	-				Vater, Geology Section, 1	1000 SW Ja	ckson S	st., Suite 420,	Tope	eka, Kansas 66612-136		785-296-3565. A 82a-1212	
	v isit us at <u>h</u>	up://www.Kdf	eks.gov/waterwell	/muex.ntml							V2	n 02a-1212	