

WATER WELL RI		W W C-3	00200	DIV	ision of Water		W 11 ID		
		e in Well Use			ources App. No		Well ID	NY 1	
1 LOCATION OF WA	Fraction	1./.		tion Number	Township Numb		ige Number		
County:	1/4 1/4	1/4	1/4 D	1 A 1.1	T S	R	□E □W		
2 WELL OWNER: La Business:	First:		Street or Rural Address where well is located (if unknown, distance and						
Address:	direction from nearest town or intersection): If at owner's address, check here:							ineck nere:	
Address:									
City:	State:	ZIP:							
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:					5 Lotitud	0.		(daaimal daamaa)	
WITH "X" IN									
SECTION BOX:	1 2) ## 3) ## or /1) 1								
N	WELL'S STATIC WATER LEVEL:								
	□ below land surface, measured on (mo-day-yr					S (unit make/model:)	
NW NE	above land surface, measured on (mo-day-yr				(WAAS enabled? \(\subseteq \text{ Yes} \(\supseteq \text{ No)} \)				
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map				
W Y E	after hours	n	Online Mapper:						
X SW SE	Well w								
	after hours pumping gpr Estimated Yield:gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC				
S	Bore Hole Diameter: in. to fi								
1 mile	in. to ft				Other				
7 WELL WATER TO BE USED AS:									
1. Domestic: 5. Public Water Supply: well ID									
☐ Household	6. Dewatering: how many wells?								
☐ Lawn & Garden	7. 🗌 Aquifer Ro								
Livestock	8. Monitorin								
2. Irrigation	9. Environmental Remediation: well ID								
3. Feedlot					b) Open Loop Surface Discharge Inj. of Water				
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? ☐ Yes ☐ No									
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other									
Casing diameter									
Casing height above land surface									
TYPE OF SCREEN OR PERFORATION MATERIAL: □ Steel □ Fiberglass □ PVC □ Other (Specify)									
☐ Steel ☐ Steinless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify) ☐ 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 ft. to ft., From ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft.									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From									
Nearest source of possible contamination:									
☐ Septic Tank	Lateral Line				Livestock Pens		cide Storage		
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well									
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Oil Well/Gas Well									
Direction from well?		Distance fro	om well?			ft			
10 FROM TO	LITHOLOG			FROM		ITHO. LOG (cont.) o		G INTERVALS	
						, ,			
Notes:									
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)									
under the husiness name	ractor's License No	1 hi	s water	well Ked	ora was comp	neted 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