

| WATER WELL | | Form V | • • • C-3 | 254 | 4897 | | sion of Wat | | | | | | |
|--|--|---------------------------------------|---------------|----------|-------------------|------------------------|--|--|-------------------------|---------|-------------|--|--|
| | | | e in Well Use | | | Resources App. No. | | | | Well ID | | | |
| | | | Fraction | | 4 ¹ /4 | Sect | tion Numbe | on Number Township Num | | | | | |
| County: 1/4 1/4 1/4 | | | | | | | | | | | | | |
| Business: di Address: | | | | | | | treet or Rural Address where well is located (if unknown, distance and irection from nearest town or intersection): If at owner's address, check here: | | | | | | |
| Address: City: | | | | | | | | | | | | | |
| 3 LOCATE WELL | | | | | | | | | | | | | |
| WITH "X" IN 4 DEPTH OF COMPLETED WELL: | | | | | | | | | | | | | |
| SECTION BOX: | ECTION BOX . Depth(s) Groundwater Encountered: 1) | | | | | | Longitude: | | | | | | |
| $\begin{array}{c} \text{SECTION DOX.} \\ \text{N} \end{array} \qquad \begin{array}{c} \text{2)} \dots \dots \text{ft.} \text{3)} \dots \dots \dots \text{ft.} \text{or } 4) \square \text{I} \\ \text{WELL'S STATIC WATER LEVEL:} \dots \dots \end{array}$ | | | | | | | | Datum: 🗌 WGS 84 🔲 NAD 83 🗌 NAD 27 | | | | | |
| WELL S STATIC WATER LEVEL: | | | | | | | | Source for Latitude/Longitude: GPS (unit make/model:) (WAAS enabled? Yes No) | | | | | |
| | | | | | | | | | | | | | |
| Pump test data: Well water was ft. | | | | | | | | \square Land Survey \square Topographic Map | | | | | |
| | K E afterhours pumpinggp Well water wasft. | | | | | | | Online Mapper: | | | | | |
| SW SF | | | | | | | | | | | | | |
| alter | | | | | | | 6 Elevation:ft. Ground Level TOC | | | | | | |
| S | S Estimated Yield:gpm Bore Hole Diameter:in. to | | | | | | Source: Land Survey GPS Topographic Ma | | | | | | |
| 1 mile | | | | | | | | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | | | |
| 1. Domestic: 5. □ Public Water Supply: well ID 10. □ Oil Field Water Supply: lease | | | | | | | | | | | | | |
| Household 6. Dewatering: how many wells? | | | | | | 11. Test Hole: well ID | | | | | | | |
| 🗌 Lawn & Garden | | 7. 🗌 Aquifer Recharge: well ID | | | | | | | \Box Uncased \Box C | | | | |
| | | 8. Monitoring: well ID | | | | | | | al: how many bores | | | | |
| 2. Irrigation | | 9. Environmental Remediation: well ID | | | | | | | Loop 🗌 Horizonta | | | | |
| 3. □ Feedlot □ Air Sparge □ Soil Vapor Extra 4. □ Industrial □ Recovery □ Injection | | | | | | | b) Open Loop □ Surface Discharge □ Inj. of Water 13. □ Other (specify): | | | | | | |
| | | | | | | | | | | | | | |
| Was a chemical/bacteriological sample submitted to KDHE? \Box Yes \Box No If yes, date sample was submitted: | | | | | | | | | | | | | |
| Water well disinfected? Yes No | | | | | | | | | | | | | |
| 8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded 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) | | | | | | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | | | | | |
| \Box Continuous Slot \Box Mill Slot \Box Gauze Wrapped \Box Torch Cut \Box Drilled Holes \Box 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. to ft., From ft. to ft. o ft. o ft. o ft. ft. to ft. ft. to ft. ft. to ft. ft. ft. ft. ft. ft. ft. ft. ft | | | | | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | | | | | |
| Nearest source of poss | | | , | | | | , | | | | | | |
| Septic Tank | | Lateral Lines | | | | | Livestock Pe | | Insectic | | | | |
| Sewer Lines | | Cess Pool | □ Sewag | ge L | agoon | | Fuel Storage | | Abando | | Well | | |
| 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) Other (Specify) Sewage Lagoon Sewage Lagoon Sewage Lagoon Storage | | | | | | | | | | | | | |
| Direction from well? | •••••• | ••••• | Distance fro | om v | vell? | | | | ft | | | | |
| 10 FROM TO | | ITHOLOG | | /111 / | FRO | | ТО | LIT | HO. LOG (cont.) or | PLUGGIN | G INTERVALS | | |
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| | Notes: | | | | | | | | | | | | |
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| 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 | | | | | | | | | | | | | |
| 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. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 | | | | | | | | | | | | | |