

					Division of Water esources App. No. Well ID					
1 LOCATION OF W		Fraction			irces App. N		Township Numb	Well ID	inge Number	
County:			/ ₄ 1/ ₄	SCCI	ion ivumbe.	1 1	T S	R		
2 WELL OWNER: La	ast Name:	First:		r Rura	al Address v	where	well is located			
Business: direction from nearest town or intersection): If at owner's address, check here:										
Address:										
Address: City:	State:	ZIP:								
3 LOCATE WELL			1							
WITH "X" IN	4 DEPTH OF COM			5 Latitude:(decimal degrees)						
SECTION BOX:	Depth(s) Groundwater Encountered: 1)				Longitude: (decimal degrees) Datum: WGS 84 NAD 83 NAD 27					
N	WELL'S STATIC WATER LEVEL:				Source for Latitude/Longitude:					
	below land surface, measured on (mo-day-yr)				GPS (unit make/model:)					
NW NE	above land surface,			(WAAS enabled? ☐ Yes ☐ No)						
	Pump test data: Well w			☐ Land Survey ☐ Topographic Map						
W E	after hours Well w			☐ Online Mapper:						
SW SE	after hours									
X	Estimated Yield:	gpm		6 Elevation:						
S	Bore Hole Diameter:			Source:						
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID										
☐ Household	6. Dewatering: how many wells?				11. Test Hole: well ID					
Lawn & Garden	7. 🗌 Aquifer R			☐ Cased ☐ Uncased ☐ Geotechnical						
Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?					
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID				a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial						13. Other (specify):				
Was a chemical/bacteriological sample submitted to KDHE? \[\sqrt{Yes} \] No If yes, date sample was submitted:										
Water well disinfected? Yes No										
8 TYPE OF CASING USED: Steel PVC Other										
Casing diameter in. to ft., Diameter ft., Diameter ft.										
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										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From										
Septic Tank	Lateral Line	es 🔲 Pit Privy		ПΙ	ivestock Per	ns	□ Insecti	cide Storag	e	
☐ Sewer Lines	☐ Cess Pool	☐ Sewage L		□ F	Fuel Storage			oned Water		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
☐ Other (Specify)										
10 FROM TO	LITHOLOG		FRO						NG INTERVALS	
10 110001 10	LITHOLOG	GIC EGG	TROI		10	Lilli	O. LOG (cont.) o.	TECGOI	TO ITTER VILES	
			37.							
	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)										
Kansas Water Well Con	tractor's License No	This W	ater Well	Reco	ord was con	nplete	d on (mo-day-y	ear)		
under the business name	of	VELL OWNED 1 '	one for		de Fee-for		anah aamatma-tI			
	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										