

WATER WELL R  ☐ Original Record ☐		VV VV C-3	0000			ion of Water			Well ID		
		ge in Well Use Fraction				rces App. No		Numb		ga Numbar	
1 LOCATION OF WATER WELL:		1/4 1/4 1/4		1/4	Section Number		1	Township Number		Range Number R	
County:  2 WELL OWNER: La	First:			Durol	1 Addross v	where well is l					
Business:											
Address:	another from nearest to vir of intersection). If at a virial is address, enough near in										
Address:											
City:	State:	ZIP:				1					
3 LOCATE WELL	4 DEPTH OF COM	PLETED WE	LL:		ft	5 Latitud	de.			(decimal degrees)	
WITH "X" IN	Depth(s) Groundwater Encountered: 1)					ft. 5 Latitude:					
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 1										
	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	□ below land surface, measured on (mo-day-yr above land surface, measured on (mo-day-yr by the first surface).					GPS (unit make/model:)					
NW NE					• • • • • •		(WAAS enabled? ☐ Yes ☐ No)				
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map						
W E	after hours pumping gp Well water was ft.					☐ Online Mapper:					
SW   SE	after hours pumping gp										
	Estimated Yield:		SP		6 Elevation:ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter: in. to				and Source: Land Survey GPS Topographic l						
mile	in. to ft.					☐ Other					
7 WELL WATER TO BE USED AS:											
1. Domestic:		iter Supply: well					Field Water Su				
Household	6. Dewatering: how many wells?										
☐ Lawn & Garden ☐ Livestock	7. Aquifer Recharge: well ID										
2. Irrigation	8. Monitoring: well ID										
3. ☐ Feedlot	9. Environmental Remediation: Well ID  ☐ Air Sparge ☐ Soil Vapor Extra				••••	a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial	☐ Recovery		_				er (specify):				
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:											
Water well disinfected? $\square$ Yes $\square$ No											
8 TYPE OF CASING USED:  Steel PVC Other											
Casing diameter in. to											
Casing height above land surface in. Weight											
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											
SCREEN-PERFORATED INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Nearest source of possible		,				,					
☐ Septic Tank	☐ Lateral Line				☐ Li	ivestock Pen			ide Storage		
☐ Sewer Lines	Cess Pool	☐ Sewa				uel Storage			oned Water	Well	
☐ Watertight Sewer Lin					☐ Fe	ertilizer Stor	age 🗌	Oil We	ll/Gas Well		
☐ Other (Specify)											
10 FROM TO	LITHOLOG		om we	FROM						G INTERVALS	
TO TROM TO	LITHOLOG	JIC LOG		TRON	1	10 1	Z1111O. LOG (t	.ont.) or	LUGGIN	JINTERVALS	
				Notes:	I						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was $\square$ constructed, $\square$ reconstructed, or $\square$ plugged											
under my jurisdiction and was completed on (mo-day-year)											
Kansas Water Well Con	tractor's License No	Th	is Wat	er Well	Recor	rd was com	pleted on (mo	-day-ye	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.										