WATER WELL R Original Record			ion of Water rces App. No.		Well ID
1 LOCATION OF W	ATER WELL: Fraction	Secti	ion Number	Township Numb	
County: SAL WELL QWNER: La	SW/4 SW/4 SK ast Name: First:	Street or Rura	30 ol Address who	T / Sere well is located	RA DEWW (if unknown, distance and
Business: DIFFC	Y CUSTOM HOMES	direction from ne			r's address, check here:
Address: P.O. Roys 2/23					
City: SHLIN	OA State. TO ZIP: WIGHT		0010	JUH, CIC	
3 LOCATE WELL WITH "X" IN	4 DEPTH OF COMPLETED WELL	£ ft.			(decimal degrees)
SECTION BOX:	Depth(s) Groundwater Encountered: 1)			le:] WGS 84 □ NAI	(decimal degrees)
1.9	WELL'S STATIC WATER LEVEL . 21	ft	Correge fo	r Latitude/Longitude	
NWNE	□ below land surface, measured on (mo-da above land surface, measured on (mo-da land surface, measured on (mo-da land surface, measured on (mo-da land surface).	ay-yr)	☐ GPS	(unit make/model: (WAAS enabled?)] Yes
	Pump test data: Well water was	ft.	☐ Land	Survey Topogr	aphic Map
W E	Well water was		L Onlin	ie Mapper:	
ŚW SE	after hours pumping	gpm	6 Elevation	n :ft	. ☐ Ground Level ☐ TOC
S	Estimated Yield:gpm Bore Hole Diameter:in. toin. to	ft. and	Source:	Land Survey	GPS Topographic Map
mile	in. to		<u> </u>	Other	
7 WELL WATER TO 1. Domestic:	5. Public Water Supply: well ID		10. □ Oil Fi	eld Water Supply: 16	ease
☐ Household	6. ☐ Dewatering: how many wells?		11. Test Hole	e: well ID	
Livestock	7. ☐ Aquifer Recharge: well ID8. ☐ Monitoring: well ID			Uncased Uncased Uncased Uncased	
2. Irrigation	9. Environmental Remediation: well	l ID	a) Close	d Loop 🔲 Horizon	tal 🔲 Vertical
3. ☐ Feedlot 4. ☐ Industrial	☐ Air Sparge ☐ Soil Vapo				scharge
Was a chemical/bacteriological sample submitted to KDHE? Yes You If yes, date sample was submitted:					
Wester and High feeted No. No.					
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other ☐ CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☐ Threaded Casing diameter ☐ Casing height above land surface ☐ In. Weight ☐ In. Weight ☐ Welded ☐ Threaded Wall thickness or gauge No. ☐ Casing height above land surface ☐ In. Weight ☐ Ibs./ft. Wall thickness or gauge No. ☐ In.					
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					
Grout Intervals: From					
Nearest source of possible Septic Tank	le contamination: ☐ Lateral Lines ☐ Pit Privy	v 🗆 🗆 I	Livestock Pens	□ Insecti	cide Storage
☐ Sewer Lines	☐ Cess Pool ☐ Sewage	Lagoon 🔲 I	Fuel Storage	☐ Aband	oned Water Well
Watertight Sewer Li	nes Seepage Pit Feedyar		Fertilizer Storag	ge ∐ Oil Wo	ell/Gas Well
Other (Specify) Direction from well? Distance from well? ft.					
10 FROM TO	FILL DIET	FROM	TO LI	THO. LOG (cont.) o	r PLUGGING INTERVALS
8 18	CLAY TAN SILTY				
18 34	SANDY LOOM TAN				
34 53	SAWS FINE TO MED. T	TAN			
		Notes:	1		
Section 1 Annual					
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) 2.7					
under my jurisdiction and was completed on (mo_day_year) \(\text{					
under the business name of PLSTINGER. PUMP STRVICE.					
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas 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

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