

WATER WELL RI		W W C-3	313	1		on of Water		W 11 ID		
		e in Well Use				ces App. No		Well ID	NY 1	
1 LOCATION OF WA	Fraction	1/		section	on Number	Township Numb		ige Number		
County:	1/4 1/4	1/4	1/4	D1	L A 11	<u>T</u> S	R	□E □W		
2 WELL OWNER: Las Business:						Address where well is located (if unknown, distance and				
Address:	direction from nearest town or intersection): If at owner's address, check								ineck nere:	
Address:										
City:	State:	ZIP:								
3 LOCATE WELL	4 DEPTH OF COM	IPI FTFD WF	тт.		ft	5 Lotitud	lo:		(daaimal daamaa)	
WITH "X" IN	Depth(s) Groundwater Encountered: 1)									
SECTION BOX: $\frac{1}{2}$ ft or $\frac{1}{2}$										
WELL'S STATIC WATER LEVEL:										
X □ □ below land surface, measured on (mo-day-yr					GPS (unit make/model:)					
NW NE	above land surface, measured on (mo-day-yr					····· (WAAS enabled? Yes No)				
	Pump test data: Well water was ft.					☐ Land Survey ☐ Topographic Map				
W E	after hours pumping gpr					Online Mapper:				
SW SE	Well water was ft. after hours pumping gpi									
	Estimated Yield:gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC					
S										
mile	in. to ft				☐ Other					
7 WELL WATER TO BE USED AS:										
1. Domestic:	5. 🗌 Public Wa	ter Supply: well	ID			10. 🔲 Oil 1	Field Water Supply: 1	ease		
☐ Household	6. Dewatering: how many wells?									
Lawn & Garden										
Livestock	8. Monitoring: well ID						rmal: how many bore			
2. Irrigation										
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ext 4. ☐ Industrial ☐ Recovery ☐ Injection						b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 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										
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 ft. to ft., From ft., From ft., From ft.										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From										
Septic Tank	Lateral Line	c □ Dit D	iv.		⊓т;	vestock Pens	□ Insecti	cide Storage		
□ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide 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)										
Direction from well?			om we							
10 FROM TO	LITHOLOG	GIC LOG		FROM		TO L	ITHO. LOG (cont.) o	r PLUGGIN	G INTERVALS	
				ļ	_					
				1	-					
				1	+					
				Notes:						
1 TOLES.										
				1						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged										
under my jurisdiction and	d was completed on (m	no-day-vear)			nd th	is record is	true to the best of m	ny knowleds	ge and belief.	
Kansas Water Well Cont	ractor's License No	Th	is Wa	ter Well F	Recor	d was com	oleted on (mo-day-y	ear)		
under the business name	of									
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.										
No Department of Health an	a Environment, Bureau of V	vater, Geology Sect	1011, 100	JU S W Jacks	son St.	., Suite 420, To	ррска, капsas 00012-13	o7. reiepnone	; 103-440-3303.	

KSA 82a-1212 Visit us at http://www.kdheks.gov/waterwell/index.html