

WATER WELL RI		VV VV C-3	002320		sion of Water		W 11 ID		
		e in Well Use			irces App. No.	T 1: N 1	Well ID	NY 1	
1 LOCATION OF WA	Fraction	1/ 1/	Secti	ion Number	Township Numb		ige Number		
County:	1/4 1/4	1/4 1/4		1 4 1 1 1	T S	R	□E □W		
2 WELL OWNER: La Business:	st Name:	First:		treet or Rural Address where well is located (if unknown, distance and					
Address:	direction from nearest town or intersection): If at owner's address, check here:							meck nere:	
Address:									
City:	State:	ZIP:			_				
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:					5 Lotitud	··		(daaimal daamaa)	
WITH "X" IN	Depth(s) Groundwater								
SECTION BOX: $\begin{array}{c} 1 \\ 2 \\ \end{array}$ ft or $\begin{array}{c} 4 \\ \end{array}$									
WELL'S STATIC WATER LEVEL:									
	□ below land surface, measured on (mo-day-yr				······ GPS (unit make/model:)				
above land surface, measured on (mo-day-yr) (WAAS enabled? \(\subseteq \text{ Yes} \subseteq \text{ No)}					
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map				
W E	after hours			Online Mapper:					
SW SE	Well w								
	after hours pumping gpr Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter: in. to fi								
1 mile					Other				
7 WELL WATER TO BE USED AS:									
1. Domestic: 5. Public Water Supply: well ID									
☐ Household	6. ☐ Dewatering: how many wells?								
☐ Lawn & Garden	7. Aquifer Recharge: well ID								
Livestock	8. Monitorin				mal: how many bore				
2. Irrigation	9. Environmental Remediation: well ID								
3. Feedlot					b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):				
4. Industrial	Recovery								
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									
Casing height above land surface									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)									
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. to ft.									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From									
Nearest source of possible contamination:									
☐ Septic Tank☐ Sewer Lines	☐ Lateral Line				ivestock Pens fuel Storage		cide Storage oned Water		
☐ Watertight Sewer Lines	☐ Cess Pool es ☐ Seepage Pit	☐ Sewage ☐ Feedya			ertilizer Storage			weii	
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Other (Specify)									
Direction from well?		Distance from	n well?			ft			
10 FROM TO	LITHOLOG		FRC			THO. LOG (cont.) o		G INTERVALS	
									
Notes:									
11 CONTRA CERCE	OD I ANDOUGED!	CEDMIE	ION TO		.11 🔽		4		
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 Contractor's License No									
under the business name	of	11118	17 atC1 WE			uay-y			
under the business name of									
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.									

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