

WATER WELL R ☐ Original Record ☐		** ** C-3				ion of Water			Well ID		
	<u> </u>	e in Well Use Fraction				rces App. No		n Mumb		ga Numbar	
1 LOCATION OF WATER WELL: County:		1/4 1/4 1/4		1/4	Section Number			Township Number		r Range Number R □ E □ W	
2 WELL OWNER: Last Name:		First:		-	Duro	ural Address where well is located (if unknown, distance and					
Business:			n nearest town or intersection): If at owner's address, check here:								
Address:	direction from nearest to via of intersection). If at o viner is address, enter interes										
Address:											
City:	State:	ZIP:				1					
3 LOCATE WELL	4 DEPTH OF COM	IPLETED 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				Dongitude:						
11	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	below land surface, measured on (mo-day-yr					GPS (unit make/model:)					
NW NE	above land surface, measured on (mo-day-yr				☐ Land Survey ☐ Topographic Map					(o)	
	Pump test data: Well water was ft.										
W E	after hours pumping gp Well water was ft.					☐ Online Mapper:					
SW SE	after hours pumping gp										
	Estimated Yield:		3			6 Elevation:ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter: in. to				t. and Source: Land Survey GPS Topographic						
mile	in. to ft.					☐ Other					
7 WELL WATER TO BE USED AS:											
1. Domestic:		ter Supply: well									
Household	6. Dewatering: how many wells?										
Lawn & Garden	7. Aquifer Recharge: well ID					☐ Cased ☐ Uncased ☐ Geotechnical					
☐ Livestock 2. ☐ Irrigation	8. Monitoring: well ID					12. Geothermal: how many bores?					
3. ☐ Feedlot	9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Ext.				••••	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											
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:											
							Other (Spec	cify)	• • • • • • • • • • • • • • • • • • • •		
	☐ Key Punched ☐ W					ne (Open Ho		-	C		
SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From											
Grout Intervals: From										•••••	
Nearest source of possible		It., FIOIII	I	11. 10		It., FIOIII	11. 1	0	It.		
Septic Tank	Lateral Line	es 🔲 Pit P	rivv		□Li	ivestock Pen	s Γ	1 Insectio	cide Storage		
☐ Sewer Lines	Cess Pool	☐ Sewa		goon		uel Storage			oned Water		
☐ Watertight Sewer Lin		☐ Feed	yard		☐ Fe	ertilizer Stor	age 🗆] Oil We	ll/Gas Well		
Other (Specify)											
Direction from well?			om we								
10 FROM TO	LITHOLOG	FIC LOG		FROM	1	TO I	LITHO. LOG (cont.) or	PLUGGIN	G INTERVALS	
				Notes:							
11003											
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	Th	is Wa	ter Well 1	Recoi	rd was com	pleted on (mo	o-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.										
Les Department of Health at	La La vironincia, Dureau Ol V	, aici, Geology Beel	, 100	JO D W JACK	SOII DL	, Duite 720, I	opena, maiisas 0	0014-130	,,. rerephone	. , 55 270-3303.	