

WATER WELL R. ☐ Original Record ☐		VV VV C-3	2202			ion of Water			Well ID		
		e in Well Use Fraction				rces App. No		n Numb		aga Numbar	
1 LOCATION OF WATER WELL: County:		1/4 1/4 1/4		1/4	Section Number			Township Number		Range Number R □ E □ W	
2 WELL OWNER: La	First:		-	Duro	Il Address where well is located (if unknown, distance and						
Business:											
Business: direction from nearest town or intersection): If at owner's address, check here: Address:											
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)					t. 5 Latitude:					
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 I										
	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										
W E	after hours pumping gp Well water was ft.					☐ Online Mapper:					
SW SE	after hours pumping gp										
	Estimated Yield:gpm					6 Elevation:ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter: in. to				and Source: Land Survey GPS Topographic						
mile		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 Exti				••••	a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial	☐ Recovery ☐ Injection					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											
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)											
	☐ Key Punched ☐ W					ne (Open Ho		-	c		
SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Nearest source of possible		It., FIOIII	1	1. 10		It., FIOIII .	Il.	10	11.		
Septic Tank	Lateral Line	es 🔲 Pit Pi	rivv		□Li	ivestock Pen	s Г	Insection	cide Storage	2	
☐ 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)											
			om we								
10 FROM TO	LITHOLOG	FIC LOG		FROM	1	TO I	LITHO. LOG	(cont.) oi	PLUGGIN	IG INTERVALS	
				1	_						
				Notes:							
110005											
				-							
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 Wat	ter Well 1	Recoi	rd was com	pleted on (m	o-day-y	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.											
Iso Department of Health at	Dureau Of V	. a.c., Georgy Beel	, 100	Jack		., 50110 720, 1	opena, manada		rerepiton	c . 05 270 5505.	