

WATER WELL RI		vv vv C-3			ion of Water		W 11 ID		
		ge in Well Use			rces App. No.		Well ID	N. 1	
1 LOCATION OF WA	Fraction		Section	on Number	Township Numb		ge Number		
County:		1/4 1/4	D1	1 4 1 1 1	T S	R	□E □W		
2 WELL OWNER: La Business:	st Name:	First:	Street or Rural Address where well is located (if unknown, distance a						
Address:	direction from nearest town or intersection): If at owner's address, check here:							:neck nere:	
Address:									
City:	State:	ZIP:							
3 LOCATE WELL	4 DEPTH OF COM	(PI FTFD WFI I •		ft. 5 Latitude:(decimal degrees)					
WITH "X" IN	Depth(s) Groundwater		11.	Longitude:					
SECTION BOX:	ON BOX: 2) ft. 3) ft., or 4)								
IN .	WELL'S STATIC WATER LEVEL:								
	□ below land surface, measured on (mo-day-yr				······ GPS (unit make/model:)				
NW NE	- NW NE Date above land surface, measured on (mo-day-yr				` /				
	Pump test data: Well w		☐ Land Survey ☐ Topographic Map						
W E	after hours Well w			Online Mapper:					
X sw se	after hours								
	Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter:	ft. and	and Source: Land Survey GPS Topographic Map						
mile		ft.		☐ Other					
7 WELL WATER TO BE USED AS:									
1. Domestic:		iter Supply: well ID				ield Water Supply: 1			
Household	6. ☐ Dewaterin								
☐ Lawn & Garden ☐ Livestock	7. ☐ Aquifer Ro 8. ☐ Monitorin								
2. ☐ Irrigation	9. Environmenta								
3. ☐ Feedlot	☐ Air Sparge	Extraction		b) Open Loop Surface Discharge Inj. of Water					
4. ☐ Industrial	☐ Recovery					r (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 in. to									
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No									
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 ft. to ft., From ft., From ft.									
GRAVEL PACK INTERVALS: From ft. to 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	☐ Lateral Line				ivestock Pens		cide 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) □ Oil Well/Gas Well									
Direction from well?		Distance from	 wall?			ft			
10 FROM TO	LITHOLOG		FRON			THO. LOG (cont.) o		GINTERVALS	
10 111011	2111020	210 200	11101	<u>'-</u>	10 2	2210, 200 (40111) 0	11200011	<u> </u>	
	Notes:								
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged									
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIFICATIO	N: This w	vater v	well was 🔲	constructed, \square rec	onstructed,	or plugged	
under my jurisdiction an Kansas Water Well Con	a was completed on (m	no-day-year)		and th	ns record is t	rue to the best of m	ıy knowledg	ge and belief.	
under the husiness name	of	1 IIIS W	aici Well	NCCOL	iu was comp	u on (mo-day-y	cai <i>)</i>		
under the business name	Send one copy to WATER W	ELL OWNER and retain	n one for you	r record	ls. Fee of \$5.00) for each <u>constructed</u> w	ell.		
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