

WATER WELL RI		W W C-3	1200	L		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	3 1	I A 11	<u>T</u> S	R	□E □W			
2 WELL OWNER: Las Business:	First:					Address where well is located (if unknown, distance and arest town or intersection): If at owner's address, check here:					
Address:	direction from nearest town or intersection): If at							r s address, c	ineck nere:		
Address:											
City:	State:	ZIP:									
3 LOCATE WELL		ft	5 I otitud	lo:		(desimal desmoss)					
WITH "X" IN	4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)				. 1ι.	,					
SECTION BOX: $\begin{array}{c} 1 \\ 2 \\ \end{array}$ ft or $\begin{array}{c} 4 \\ \end{array}$											
N	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)						
	Pump test data: Well water was ft.					☐ Land Survey ☐ Topographic Map					
W E	after hours pumping gpi				Online Mapper:						
SW SE	Well water wasft. after hours pumping gpi										
	Estimated Yield:gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC						
S	X						☐ Land Survey ☐				
1 mile											
7 WELL WATER TO BE USED AS:											
1. Domestic: 5. Public Water Supply: well ID											
☐ Household	6. ☐ Dewatering: how many wells?										
☐ Lawn & Garden	n 7. Aquifer Recharge: well ID										
Livestock	8. Monitoring: well ID						rmal: how many bore				
2. Irrigation	9. Environmental Remediation: well ID										
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ext						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?											
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other											
Casing diameter											
Casing height above land surface											
TYPE OF SCREEN OR PERFORATION MATERIAL: □ Steel □ Stainless Steel □ PVC □ Other (Specify)											
☐ Steel ☐ Steinless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify) ☐ 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. 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					vestock Pens iel Storage		icide Storage loned Water V			
☐ Watertight Sewer Line	☐ Cess Pool es ☐ Seepage Pit	☐ Sewa ☐ Feed				ertilizer Stora			weii		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Other (Specify)											
Direction from well?		Distance fi	rom we	 :11?			ft				
10 FROM TO	LITHOLOG			FROM			ITHO. LOG (cont.) o		G INTERVALS		
			-								
Notes:											
11 CONTRA CONTRA	OD 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	OFFE CONTRACTOR	mro:			., —					
11 CONTRACTOR'S	UK LANDOWNER'S	S CERTIFICA	TION	: This wa	iter v	vell was ∐	constructed, \(\subseteq \text{rec}	onstructed,	or \square plugged		
under my jurisdiction and was completed on (mo-day-year)											
under the business name	of	11	110 W d	VV CII N			u on (mo-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