

| WATER WELL RI | | 77 VV C-3 | 1203 | 1 | | on of Water | | W 11 ID | | | |
|--|--|---------------|-----------|-------------|--|--|---------------------------|-----------------|--------------|--|--|
| | | e in Well Use | | | | rces App. No | | Well ID | NY 1 | | |
| 1 LOCATION OF WA | Fraction | 1/ | | section | on Number | Township Numb | | ge Number | | | |
| County: | 1/4 1/4 | 1/4 | | D 1 | I A 1.1 | T S | R | □ E □ W | | | |
| 2 WELL OWNER: Las Business: | | | | | al Address where well is located (if unknown, distance and | | | | | | |
| Address: | direction from nearest town or intersection): If at owner's address, | | | | | | | er s address, o | eneck nere: | | |
| Address: | | | | | | | | | | | |
| City: | State: | ZIP: | | | | | | | | | |
| 3 LOCATE WELL | | ft | 5 Lotitud | lo: | | (daaimal daamaaa) | | | | | |
| WITH "X" IN | | | | | | | | | | | |
| SECTION BOX: ft 2) ft or 4) | | | | | | | | | | | |
| WELL'S STATIC WATER LEVEL: | | | | | | | | | | | |
| below land surface, measured on (mo-day-yi | | | | | 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 gpr | | | | | Online Mapper: | | | | | |
| SW SE | Well water was ft. after hours pumping gpi | | | | | | | | | | |
| | atter nours pumpinggp | | | | m 6 Elevation:ft. ☐ Ground Level ☐ TOC | | | | | | |
| S | | | | | | | | | | | |
| 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 | | | | | | | | | | | |
| ☐ 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 13. ☐ Other (specify): | | | | | |
| 4. Industrial | Recovery | ☐ Inject | | | | | | | | | |
| 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) | | | | | | | | | | | |
| □ Continuous Stot □ Mill Stot □ Gauze Wrapped □ Torch Cut □ Drilled Holes □ Other (Specify) | | | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | | | | | |
| 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 f | | | | | f | | | | |
| 10 FROM TO | LITHOLOG | | IOIII W | FROM | | | | | CINTERVALS | | |
| TO TROM | EITHOLOG | JIC LOG | | TROM | | 10 1 | 11110. LOG (cont.) 0 | LUGGII | OHVIERVALD | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| No. | | | | | | Notes: | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| 11 CONTRACTOR'S | OR LANDOWNER'S | S CERTIFICA | TION | : This wa | ater v | well was 🗌 | constructed, rec | onstructed, | or 🗌 plugged | | |
| under my jurisdiction and was completed on (mo-day-year) | | | | | | | | | | | |
| Kansas Water Well Cont | ractor's License No | Th | ns Wa | iter Well F | kecor | rd was comp | pleted on (mo-day-y | ear) | ••••• | | |
| under the business name | end one copy to WATER W | FILOWNER and | retain o | ne for your | record | ls Fee of \$5 0 | () for each constructed w | ell | | | |
| under the business name of | | | | | | | | | | | |

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