

WATER WELL RI		W W C-3	0000			on of Wate			W 11 ID											
<u> </u>		ge in Well Use				ces App. N		T 1 N 1.	Well ID	N 1										
1 LOCATION OF WATER WELL:		Fraction 1/4 1/4	1/4	Section	on Numbe	er	Township Numb	er Rai	nge Number											
County:  2 WELL OWNER: Last Name:			1/4	-	D.mo1	l Addmona	b			E W										
Business:	st Name:	First:		Street or Rural Address where well is located (if unknown, distance and 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 COMPLETED WELL:					ft. 5 Latitude:(decimal degrees)															
WITH "X" IN	Depth(s) Groundwater Encountered: 1)					Longitude:														
SECTION BOX:	$\frac{1}{N}$ 2) ft. 3) ft., or 4) $\square$ 1					Well Datum: □ WGS 84 □ NAD 83 □ NAD 27														
	WELL'S STATIC WATER LEVEL:					Source for Latitude/Longitude:														
	, measured on (mo				GPS (unit make/model:)															
NW NE	, measured on (mo-day-yr)				(WAAS enabled? ☐ Yes ☐ No)															
	Pump test data: Well water was ft.					☐ Land Survey ☐ Topographic Map														
WE	after hours pumping gpm Well water was ft.					☐ Online Mapper:														
SW SE	after hours pumping gpm																			
	Estimated Yield:					6 Elevation:ft. ☐ Ground Level ☐ TOC														
S	Bore Hole Diameter:		. ft. and	d Source: Land Survey GPS Topographic M																
1 mile	in. to ft.																			
7 WELL WATER TO BE USED AS:																				
1. Domestic:	5. Public Wa		10. Oil Field Water Supply: lease																	
Household	6. Dewatering: how many wells?					11. Test Hole: well ID														
☐ Lawn & Garden☐ Livestock						☐ Cased ☐ Uncased ☐ Geotechnical														
2. Irrigation	8. Monitoring: well ID					12. Geothermal: how many bores?														
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction					b) Open Loop  Surface Discharge  Inj. of Water														
4. ☐ Industrial ☐ Recovery ☐ Injection								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 JOINTS: Glued Clamped Welded Threaded																				
Casing diameter ft., Diameter ft., Diameter ft.																				
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																				
GRAVEL PACK INTERVALS: From																				
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other																				
Nearest source of possible		,				,														
☐ Septic Tank	□ Lateral Line					vestock Pe			cide Storage											
☐ Sewer Lines	Cess Pool	☐ Sewa				iel Storage			oned Water											
☐ Watertight Sewer Line		☐ Feedy	yard		☐ Fe	ertilizer Sto	rage	☐ Oil We	ll/Gas Well											
☐ Other (Specify)																				
10 FROM TO	LITHOLOG		om we	FROM						G INTEDVALS										
TO PROM TO	LITHOLOG	SIC LOG		TROW		10	LIII	no. Log (cont.) of	LUGGIN	UINTERVALS										
										-										
				Notes:																
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was $\square$ constructed, $\square$ reconstructed, or $\square$ plugged																				
under my jurisdiction an Kansas Water Well Cont	d was completed on (n	no-day-year)		a	nd thi	is record i	is tru	e to the best of m	y knowled	ge and belief.										
Kansas Water Well Cont	ractor's License No	Thi	ıs Wat	er Well I	Recor	d was con	nple	ted on (mo-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.										