

☐ Original Record ☐ Correction ☐ Change in Well Use					Division of Water Resources App. No. Well ID					
1 LOCATION OF W.		Fraction			ion Number		nship Numbe	Well ID	nge Number	
County:			/ <sub>4</sub> 1/ <sub>4</sub>				_			
2 WELL OWNER: La	ast Name:	First:		r Rura	al Address v	_	-			
2 WELL OWNER: Last 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:										
Address: City:	State:	ZIP:								
3 LOCATE WELL										
WITH "X" IN	4 DEPTH OF COM			5 Latitude:(decimal degrees)						
SECTION BOX:	Depth(s) Groundwater Encountered: 1)				Longitude:         (decimal degrees)           Datum:         WGS 84         NAD 83         NAD 27					
N	WELL'S STATIC WA	ш Diy w	U11			84 □ NAL <u>de/Longitude</u> :	_	(AD 27		
	☐ below land surface.			☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)						
NW NE	above land surface,									
	Pump test data: Well w			☐ Land Survey ☐ Topographic Map						
E E	after hours Well w			☐ Online Mapper:						
SW   SE	after hours									
	Estimated Yield:	gpm			6 Elevation:ft. Ground Level TOC					
S			in. to ft. and			Source:				
1 mile  in. to ft.										
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID										
☐ Household	6. Dewatering: how many wells?									
☐ Lawn & Garden	7. ☐ Aquifer Re									
☐ Livestock	8. Monitorin			12. Geothermal: how many bores?						
2. Irrigation	9. Environmenta			a) Closed Loop						
3. ☐ Feedlot 4. ☐ Industrial						b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):				
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:										
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)										
□ 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  Septic Tank	e contamination:   Lateral Line	es		Пι	Livestock Per	10	☐ Insectic	ide Storage		
Sewer Lines	☐ Cess Pool	☐ Sewage L	agoon		Fuel Storage	15	☐ Abando			
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well										
☐ Other (Specify)										
								DLUCCIN	CINTEDVALC	
10 FROM TO	LITHOLOG	GIC LOG	FRO	M	TO	LITHO. L	OG (cont.) or	PLUGGIN	G INTERVALS	
		Notes:								
11 CONTRACTORIS OR LANDOWNIERIS CERTIFICATION: The second of the second										
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	This W	ater Well	Reco	ord was com	pleted or	n (mo-dav-ve	ar)	50 and benef.	
under the business name	e of									
	Send one copy to WATER W								705 207 2575	
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.  Visit us at <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> KSA 82a-1212										
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