

WATER WELL RI				1011		sion of Wate			W-11 ID		
		e in Well I				rces App. N		T 1 N 1.	Well ID	N 1	
1 LOCATION OF WA	Fraction 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4			Section Number		r	Township Numb		Range Number		
County:	1/4	1/4 1		D.	1 4 1 1	1	<u>T</u> S	R	□ E □ W		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, Business: direction from pearest town or intersection): If at owner's address, or direction from pearest town or intersection.											
Business: direction from nearest town or intersection): If at owner's address, check here:											
Address:											
City:	State:	ZIP:									
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:						5 Tatitu	.d			(1 : 11)	
WITH "X" IN	WITH "A" IN Donth(s) Groundwater Engountered: 1)					8					
SECTION BOX: ft 3) ft or 4)					Editate:						
N	WELL'S STATIC WATER LEVEL:							Latitude/Longitude		NAD 21	
	below land surface, measured on (mo-day-yr)							init make/model:)	
NW NE	above land surface, measured on (mo-day-yr)							WAAS enabled? □		· ·	
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map						
WE	after hours pumping gp Well water was ft.					Online Mapper:					
swX-se											
	after hours pumpir Estimated Yield:gpm						6 Elevation:ft. ☐ Ground Level ☐ TOC				
S	Bore Hole Diameter: in. to fi										
mile			Other								
1 mile in. to ft. Uniter											
1. Domestic: 5. Public Water Supply: well ID											
☐ Household	6. ☐ Dewatering: how many wells?										
☐ Lawn & Garden	<u> </u>										
Livestock	8. Monitoring: well ID										
2. Irrigation	9. Environmental Remediation: well ID										
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ext					l	b) Open Loop					
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 JOINTS: Glued Clamped Welded Threaded											
Casing diameter											
Casing height above land surface											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
☐ Steel ☐ Stainless 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)											
	☐ Key Punched ☐ W					ne (Open H		omer (speen))			
SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.											
9 GROUT MATERIAL: Neat cement Dement grout Bentonite Other											
Grout Intervals: From											
Nearest source of possible											
☐ Septic Tank	Lateral Line		Pit Privy			ivestock Per			cide Storage		
☐ Sewer Lines	Cess Pool		Sewage L			uel Storage			oned Water		
☐ Watertight Sewer Line ☐ Other (Specify)		L	_ Feedyard		□F	ertilizer Stor	rage	☐ Oil We	ll/Gas Well		
Direction from well?								ft			
10 FROM TO	LITHOLOG			FRO				HO. LOG (cont.) or		GINTERVALS	
TO TROM	EITHOLOG	ore Lou		TRO	IVI	10	LIII	110. LOG (cont.) of	LUGGII	GIVILICIALS	
				Notes	<u> </u>						
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTI	FICATIO	N: This	water	well was	co	nstructed, \square reco	onstructed,	or plugged	
under my jurisdiction an	d was completed on (m	no-day-ye	ar)		and th	nis record is	s tru	e to the best of m	y knowled	ge and belief.	
Kansas Water Well Cont	tractor's License No		This W	ater Well	Reco	rd was con	nplet	ted on (mo-day-y	ear)		
under the business name	ord one copy to WATER W	ELL OWN	ED and mate:	ono for v		de For of ¢ f	00 f	an anah annatmatad			
	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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.										

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