

WATER WELL RI		** ** C-3	0000		ion of Water		W 11 ID		
		ge in Well Use			rces App. No.	T 1: N 1	Well ID	NY 1	
1 LOCATION OF WA	Fraction	1/ 1/	Secti	on Number	Township Numb		ige Number		
County:		1/4 1/4	D	1 4 1 1 1	T S	R	□E □W		
2 WELL OWNER: La Business:	st Name:	First:		treet or Rural Address where well is located (if unknown, distance and					
Address:	direction from nearest town or intersection): If at owner's address, check here:							ineck nere:	
Address:									
City:	State:	ZIP:							
3 LOCATE WELL	:	ft	5 Letitud	· ·		(daaimal daamaa)			
WITH "X" IN									
SECTION BOX: Depth(s) Groundwater Encountered: 1)									
N									
	□ below land surface, measured on (mo-day-yr				····· GPS (unit make/model:)				
above land surface, measured on (mo-day-yr) (WAAS enabled? ☐ Yes ☐ No)					
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map				
W X E	after hours			Online Mapper:					
SW SE	Well w								
	after hours pumping gpr Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter:	ft. and							
mile			Other						
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 R								
Livestock	8. Monitorin				mal: how many bore				
2. Irrigation	9. Environmental Remediation: well ID								
3. Feedlot					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 JOINTS: Glued Clamped Welded Threaded									
Casing diameter									
Casing height above land surface									
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 contamination: □ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide Storage									
☐ Septic Tank☐ Sewer Lines	☐ Lateral Line ☐ Cess Pool				ivestock Pens				
□ 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)									
Direction from well?		Distance from	well?			ft			
10 FROM TO	LITHOLOG	GIC LOG	FRO	M	TO LI	THO. LOG (cont.) o	r PLUGGIN	G INTERVALS	
			37 /						
Notes:									
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 Contractor's License No									
under the business name	of					on (mo day y			
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 ar	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