

					vision of Water ources App. No. Well ID					
1 LOCATION OF W.		Fraction			urces App. Notion Number				ge Number	
County:	1/4 1/4	1/4 1/4	Sect	T S			R DE DW			
2 WELL OWNER: La	ast Name:	First:		or Rura	al Address v	where well is loc				
Business: direction from nearest town or intersection): If at owner's address, check here:										
Address:										
Address: City:	State:	ZIP:								
3 LOCATE WELL										
WITH "X" IN	4 DEPTH OF COMPLETED WELL:				5 Latitude:(decimal degrees)					
SECTION BOX:	Depth(s) Groundwater Encountered: 1)				Longitude:					
N	WELL'S STATIC WATER LEVEL:				Source for Latitude/Longitude: GPS (unit make/model:)					
	☐ below land surface, measured on (mo-day-yr)									
NW NE	above land surface, measured on (mo-day-yr)				(
	Pump test data: Well water was ft. after hours pumping gpm				☐ Land Survey ☐ Topographic Map					
E E	Well w			☐ Online Mapper:						
SW SE	after hours									
	Estimated Yield:			6 Elevation:ft. Ground Level TO						
S	Bore Hole Diameter:			Source:						
1 mile in. to ft.										
1. Domestic:		oter Supply: well ID			10 🗆 0:1	Field Water Supp	lv: leace			
☐ Household	5. Public Water Supply: well ID					ole: well ID				
Lawn & Garden	7. Aquifer Re			☐ Cased ☐ Uncased ☐ Geotechnical						
Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?					
2. Irrigation	9. Environmental Remediation: well ID				a) Closed Loop					
3. ☐ Feedlot 4. ☐ Industrial	☐ Air Sparge ☐ Soil Vapor Extraction b) Open Loop ☐ Surface Discharge ☐ Inj. of Water (specify): ☐ Recovery ☐ Injection 13. ☐ Other (specify): ☐ Other (specify): ☐ 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 in. to ft., Diameter in. to ft.										
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										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From										
Nearest source of possible contamination: Septic Tank										
☐ Sewer Lines	☐ Cess Pool	☐ Sewage	Lagoon	□ F	Fuel Storage	□ A	bandoned			
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
☐ Other (Specify)										
10 FROM TO	LITHOLOG		FRO			LITHO. LOG (cor		IGGIN	GINTERVALS	
10 11011 10	LITHOLOG	GIC LOG	1100	7171	10	EITHO. EOG (col	it.) Of T.D.	<u> </u>	SITTERTIES	
	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 Con	tractor's License No	This	Water We	l Reco	ord was com	pleted on (mo-d	ay-year)			
under the business name	e 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.										
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212										