

					vision of Water Sources 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	-		S	_			
2 WELL OWNER: La	ast Name:	First:		or Rura	al Address v	where well is locate				
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 COM			,						
SECTION BOX:	Depth(s) Groundwater I			Longitude: (decimal degrees) Datum: WGS 84 NAD 83 NAD 27						
N	2) ft. 3) ft., or 4) □ Dry W WELL'S STATIC WATER LEVEL: ft.					for Latitude/Longit		□N	AD 27	
	☐ below land surface, measured on (mo-day-yr)				GPS (unit make/model:)					
NW NE	above land surface, measured on (mo-day-yr)				(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	Pump test data: Well water wasft. afterhours pumpinggpm				☐ Land Survey ☐ Topographic Map					
E	Well w			☐ Online Mapper:						
SW SE	after hours									
	Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC					
S	Bore Hole Diameter:			Source:						
1 mile in. to ft. Uother										
1. Domestic:		ater Supply: well ID			10 🗆 Oil	Field Water Supply	· lease			
☐ Household	6. ☐ Dewatering: how many wells?				10. ☐ Oil Field Water Supply: lease					
Lawn & Garden	7. 🗌 Aquifer R			☐ Cased ☐ Uncased ☐ Geotechnical						
Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?					
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID				a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial	☐ Air Sparge ☐ Soil Vapor Extraction b) Open Loop ☐ Surface Discharge ☐ Inj. of ` ☐ Recovery ☐ Injection 13. ☐ Other (specify):									
Was a chemical/bacteriological sample submitted to KDHE? \[\sqrt{Yes} \] No If yes, date sample was submitted:										
Water well disinfected? \square Yes \square No										
8 TYPE OF CASING USED: Steel PVC Other										
Casing diameter in. to ft., Diameter ft., Diameter 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										
Septic Tank	Lateral Line	es 🔲 Pit Privy	V	ПΙ	Livestock Pen	s	cticide	Storage		
☐ Sewer Lines	☐ Cess Pool	☐ Sewage	Lagoon	□ I	Fuel Storage	☐ Aba	ındoned	l Water \		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
☐ Other (Specify)										
10 FROM TO	LITHOLOG		FRO			LITHO. LOG (cont		UGGIN	G INTERVALS	
10 1110111 10		010 20 0		112	10	277770, 200 (40	/ 0112	00011	011/1211/1125	
			N7 4							
	Notes:									
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged										
under my jurisdiction ar	nd was completed on (m	no-dav-vear)		and t	his record is	true to the best o	f mv kr	nowleds	ge and belief.	
Kansas Water Well Con	tractor's License No	This `	Water Wel	l Reco	ord was com	pleted on (mo-da	y-year)			
under the business name	Send one conv to WATER W	/FII OW/NED and rate	in one for yo	ur reco	rds Fac of \$5	00 for each constructs	1 well	· · · · · · · · · · · · · · · · · · ·		
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										