

☐ Original Record ☐ Correction ☐ Change in Well Use					Division of Water Resources App. No. Well ID				
1 LOCATION OF W		Fraction			ion Number		→ Well ID	inge Number	
County:		1/4 1/4	1/4 1/4		T S		R DE DW		
2 WELL OWNER: La	ast Name:	First:		reet or Rural Address where well is located (if unknown, distance and					
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			5 Latitude:(decimal degrees)					
SECTION BOX:	Depth(s) Groundwater Encountered: 1)				Longitude:				
N	WELL'S STATIC WA	+) □ Diy w	t.	Source for Latitude/Longitude:					
	below land surface, measured on (mo-day-yr)					GPS (unit make/model:)			
NW	above land surface,			(WAAS enabled? ☐ Yes ☐ No)					
	Pump test data: Well w			☐ Land Survey ☐ Topographic Map					
W E	after hours Well w			☐ Online Mapper:					
SW SE	after hours								
	Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC				
S	Bore Hole Diameter: in. to			l	Source: Land Survey GPS Topographic Map Other				
1 mile in. to ft. Uother									
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease 10. Oil Field Water Supply: lease									
☐ Household	6. ☐ Dewatering: how many wells?				11. Test Hole: well ID				
Lawn & Garden	7. 🗌 Aquifer R			☐ Cased ☐ Uncased ☐ Geotechnical					
Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?				
2. Irrigation	9. Environmental Remediation: well ID				a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extraction 4. ☐ Industrial ☐ Recovery ☐ Injection					13. Other (specify):				
Was a chemical/bacteriological sample submitted to KDHE? \[\text{Yes} \] No If yes, date sample was submitted:									
Water well disinfected? Yes No									
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									
Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage									
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)									
10 FROM TO	LITHOLOG		FRO			LITHO. LOG (cont.)		NG INTERVALS	
10 11011 10	LITHOLOG	GIC LOG	1100	7171	10 1	ETTTO: LOG (cont.)	<u> </u>	TO ITTER VILES	
	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. This Water Well Record was completed on (mo-day-year) under the business name of									
under the business name	of	TELL OWNER 1	oin oct f		-da Ε : 00σ :	00 for each / 1			
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									