

WATER WELL RI		** ** C-3	9001		ion of Water		W 11 ID		
		ge in Well Use			rces App. No		Well ID	NT 1	
1 LOCATION OF WATER WELL:		Fraction 1/4 1/4	1/4 1/4	Secti	on Number	Township Numb	l l	ge Number	
County: 2 WELL OWNER: Last Name:				D.1	1 Addmaga v	T S	R	□ E □ W	
Business:	st Name:	First: Street or Rural Address where well is located (if unknown, distribution from nearest town or intersection): If at owner's address, check							
Address:			direction	direction from hearest town of intersection). If at owner 3 address, effects here.					
Address:									
City:	State:	ZIP:			1				
3 LOCATE WELL WITH "X" IN	PLETED WELL: ft.			5 Latitude:(decimal degrees)					
SECTION BOX: Depth(s) Groundwater Encountered: 1)				ft. Longitude:					
N	3) ft., or 4)				□ WGS 84 □ NA				
		TER LEVEL: ft.			Source for Latitude/Longitude:				
	, measured on (mo-day-yr), measured on (mo-day-yr)			GPS (unit make/model:)					
NW NE	vater was ft.			(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map					
W E		pumpinggpm			☐ Calid Survey ☐ Topographic Map				
	Well v	. ft.							
SW SE	after hours	gpm	6 Elevation:ft. ☐ Ground Level ☐ TOC						
	Estimated Yield:gpm Bore Hole Diameter:in. to					Source: Land Survey GPS Topographic Map			
mile					Other				
1 mile in. to ft. Under									
1. Domestic:		ater Supply: well ID			10. □ Oil 1	Field Water Supply: 10	ease		
☐ Household									
☐ Lawn & Garden	charge: well ID			☐ Cased ☐ Uncased ☐ Geotechnical					
Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?				
2. Irrigation					a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
3. ☐ Feedlot 4. ☐ Industrial	☐ Air Spargo☐ Recovery		r Extraction	1					
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									
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									
□ 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	es ☐ Pit Privy ☐ Sewage I	agoon		uel Storage		oned Water V	Well	
☐ Watertight Sewer Line		☐ Feedyard			ertilizer Stora		ell/Gas Well	W CII	
Other (Specify)									
Direction from well?									
10 FROM TO	LITHOLO	GIC LOG	FRO	M	TO L	ITHO. LOG (cont.) or	r PLUGGINO	3 INTERVALS	
								_	
			Notes	s:					
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)									
under the business name	of	1 IIIS V	· atti VV El		iu was cuill	u on (mo-day-y	cai <i>j</i>		
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 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