

WATER WELL RI		** ** C-3	10330		ion of Water					
		ge in Well Use			rces App. No.	T 1: N 1	Well ID	N. 1		
1 LOCATION OF WA	Fraction	1/ 1/	Secti	on Number	Township Numb		ge Number			
County:	1/4 1/4	1/4 1/4	D	1 4 1 1 1	T S	R	□E □W			
2 WELL OWNER: La Business:	st Name:	First:								
Address:	direction from nearest town or intersection): If at owner's address, o							meck nere:		
Address:										
City:	State:	ZIP:								
3 LOCATE WELL		ft	5 Letitud	··		(daaimal daamaaa)				
WITH "X" IN										
SECTION BOX:	BOX: Depth(s) Groundwater Encountered: 1)									
N	WELL'S STATIC WATER LEVEL:									
		easured on (mo-day-yr)			GPS (unit make/model:)					
NW NE	measured on (mo-day-yr)			(WAAS enabled? ☐ Yes ☐ No)						
	ft.			☐ Land Survey ☐ Topographic Map						
W E	after hours			☐ Online Mapper:						
SW SE	Well w									
	after hours pumping			6 Elevation:ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter: in. to f									
mile	in. to f				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 Re			☐ Case	d Uncased	Geotechnica ¹	l			
☐ Livestock	8. Monitoring									
2. Irrigation	9. Environmenta									
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? ☐ Yes ☐ 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 ft. to ft., From ft., From ft., From ft.										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From										
Nearest source of possible contamination:										
☐ Septic Tank	Lateral Line				ivestock Pens		cide Storage			
☐ Sewer Lines	Cess Pool	Sewage			uel Storage		loned Water V	Well		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Oil Well/Gas Well										
Direction from well?		Distance from	 . well?			ft				
10 FROM TO	LITHOLOG		FRO			THO. LOG (cont.) o		GINTERVALS		
10 11(0)(1	EIIIOEO	310 200	TRO		10 21	THO. EOG (Conc.) O	<u> </u>	SHYPERYPES		
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)										
under the business name	ractor's License No	1 his	water Wel	i Keco	ru was comp	ieied on (mo-day-y	ear)	•••••		
S	end one copy to WATER W	ELL OWNER and reta	ain one for vo	ur record	ds. Fee of \$5.00	for each constructed w	ell.	• • • • • • • • • • • • • • • • • • • •		
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