

☐ Original Record ☐ Correction ☐ Chang		1100	J		on of Water		Wall ID			
Original Record Correction Chang  1 LOCATION OF WATER WELL:	ge in Well Use Fraction				ces App. No		Well ID	aa Numbaa		
	1/4 1/4	1/4		secuc	on Number	Township Numb	ber Ran R	ige Number □ E □ W		
County:  2 WELL OWNER: Last Name:		/4		Duro1	Addross					
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and 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:										
WITH "A" IN Donth(s) Groundwater Engountered: 1)										
SECTION BOX: 1 2) ft 3	2) ft. 3) ft., or 4) ☐ Dry									
WELL'S STATIC WA'	WELL'S STATIC WATER LEVEL: ft				Source for Latitude/Longitude:					
□ below land surface.	□ below land surface, measured on (mo-day-yr) □ above land surface, measured on (mo-day-yr)					S (unit make/model:	<u></u>	)		
					(11111111111111111111111111111111111111					
Pump test data: Well w	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map					
1 '' 1	after hours pumping gpm				☐ Online Mapper:					
CTT CT	Well water was ft. after hours pumping gpm									
	Estimated Yield:gpm				<b>6 Elevation</b> :ft. ☐ Ground Level ☐ TOC					
	Bore Hole Diameter: in. to ft. and				Source: Land Survey GPS Topographic Map					
	in. to									
7 WELL WATER TO BE USED AS:										
1. Domestic: 5. Public Water Supply: well ID										
☐ Household 6. ☐ Dewaterin	6. Dewatering: how many wells?									
	7. Aquifer Recharge: well ID									
	8. Monitoring: well ID				12. Geothermal: how many bores?					
	9. Environmental Remediation: well ID									
	☐ Air Sparge ☐ Soil Vapor Extracti				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										
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)										
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 ☐ 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		from w	FROM			π ITHO. LOG (cont.) ο		CINTEDVALC		
10 FROM 10 LITHOLOG	SIC LUG		FROM		10 1	TTHO. LOG (cont.) o	PLUGGIN	GINTERVALS		
				+						
			Notes:							
110003										
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										
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