

WATER WELL R ☐ Original Record ☐		W W C-3	017			ion of Water	ı		Well ID		
1 LOCATION OF W.	<u> </u>	e in Well Use Fraction				rces App. No		in Numb		aga Numbar	
County:	1/4 1/4 1/4 1/4 1/2			Section Number			Township Number T S		Range Number R □ E □ W		
2 WELL OWNER: La	First:			Durol	Il Address where well is located (if unknown, distance and						
Business:		nearest town or intersection): If at owner's address, check here:									
Address:											
Address:											
City:	State:	ZIP:				1					
3 LOCATE WELL	4 DEPTH OF COM		ft. 5 Latitude:(decimal degrees)					(decimal degrees)			
WITH "X" IN	Depth(s) Groundwater Encountered: 1)				. 10.	Longitude:					
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 I				Dry Well Datum: \(\superscript{WGS 84}\) \(\superscript{NAD 83}\) \(\superscript{NAD 27}\)						
17	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	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 was ft.				(√ o)	
			☐ Land Survey ☐ Topographic Map								
W E	after hours			☐ Online Mapper:							
SW SE	Well water was ft. after hours pumping gp										
	Estimated Yield:	5P		6 Elevation:ft. ☐ Ground Level ☐ TOC							
S	Bore Hole Diameter: in. to				and Source: Land Survey GPS Topographic						
mile			☐ Other								
7 WELL WATER TO BE USED AS:											
1. Domestic:		ter Supply: well l									
Household	6. ☐ Dewatering: how many wells? 7. ☐ Aquifer Recharge: well ID										
☐ Lawn & Garden ☐ Livestock											
2. Irrigation	8. Monitoring: well ID										
3. ☐ Feedlot	9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Ext.				•••	a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial											
Was a chemical/bacteriological sample submitted to KDHE? ☐ 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											
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											
SCREEN-PERFORATED INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
Nearest source of possible		,				,					
☐ Septic Tank	□ Lateral Line				☐ Li	ivestock Pen			cide Storage		
☐ Sewer Lines	Cess Pool	☐ Sewa				uel Storage			oned Water		
☐ Watertight Sewer Lin					☐ Fe	ertilizer Stor	age [_ Oil We	ell/Gas Well		
☐ Other (Specify)											
10 FROM TO	LITHOLOG		om we	FROM						G INTERVALS	
TO TROW TO	LITHOLOG	JIC LOG		TROW	1	10 1	ZITIO, LOO	(cont.) of	LUGGIN	UINTERVALS	
				Notes:	l						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \square constructed, \square reconstructed, or \square plugged											
under my jurisdiction an	d was completed on (m	no-day-year)		a	nd th	is record is	true to the b	pest of m	y knowled	ge and belief.	
Kansas Water Well Con	tractor's License No	Thi	ıs Wa	ter Well I	Kecoi	rd was com	pleted on (n	no-day-y	ear)		
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.										