

WATER WELL RI		W W C-3	11091		ion of Water		W 11 ID		
		e in Well Use			rces App. No.		Well ID	NY 1	
1 LOCATION OF WA	Fraction	1/. 1/.	Secti	on Number	Township Numb		ige 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:					ere well is located (if unknown, distance and		
Address:	direction from nearest town or intersection): If at owner's address, check here:							ineck nere:	
Address:									
City:	State:	ZIP:							
3 LOCATE WELL	<b>.:</b>	ft	5 Lotitud	n•		(daaimal daamaa)			
WITH "X" IN	Depth(s) Groundwater 1								
SECTION BOA: $\begin{array}{c} 1 \\ 2 \\ \end{array}$ ft or $\begin{array}{c} 4 \\ \end{array}$									
WELL'S STATIC WATER LEVEL:									
	□ below land surface, measured on (mo-day-yr				······ GPS (unit make/model:)				
above land surface, measured on (mo-day-yr				(WAAS enabled? \( \subseteq \text{ Yes} \( \subseteq \text{ No} \)					
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map				
W E	after hours			☐ Online Mapper:					
SW SE	Well w								
1 1 , 1 , 1	after hours pumping gpr Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC					
	Bore Hole Diameter:	ft and							
mile			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								
Livestock	8. Monitoring								
2. Irrigation	9. Environmenta								
3. Feedlot	☐ Air Sparge ☐ Soil Vapor Extr				b) Open Loop				
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       □ Fiberglass       □ PVC       □ Other (Specify)									
☐ Steel     ☐ Steinless Steel     ☐ Fiberglass     ☐ PVC     ☐ Other (Specify)     ☐ 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. 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									
□ Sewer Lines     □ Cess Pool     □ Sewage Lagoon     □ Fuel Storage     □ Abandoned Water Well       □ Watertight Sewer Lines     □ Seepage Pit     □ Feedyard     □ Fertilizer Storage     □ Oil Well/Gas Well									
□ Watertight Sewer Lines       □ Seepage Pit       □ Feedyard       □ Fertilizer Storage       □ Oil Well/Gas Well         □ Other (Specify)       □ Other (Specify)									
Direction from well?		Distance from	well?			ft			
10 FROM TO	LITHOLOG		FRO			THO. LOG (cont.) o		G INTERVALS	
						. ,			
	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 husiness name	of	1 mis	water wel	i Keco	iu was comp	ieteu on (mo-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.									

KSA 82a-1212